Ontario
Ministry of
Community and
Social Services

April 1985

A Policy Statement on *Standards for Foster Care*

Executive Summary

Ontario

Ministry of Community and Social Services

Deputy Minister

416/965-2344

Hepburn Block
Queen's Park
Toronto, Ontario
M7A 1E9

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Dear Friends,

I am pleased to release A Policy Statement on Standards for Foster Care. The release of this document marks the culmination of a comprehensive consultation process on practices and procedures necessary to ensure a uniform, minimum standard of foster care service throughout Ontario.

The conscientious participation of all those who responded reflects a high level of commitment to the children and families who benefit from these services, and also to the principles of good foster care. I am confident that your valuable contributions have resulted in significant improvements to the final standards, and ultimately to the provision of better foster care services in our province.

Since the release of Foster Care: A Discussion Paper in 1979, the Ministry, agencies and foster parents have been exploring ways to implement a series of initiatives to improve foster care service delivery. The establishment of these standards is yet another part of an ongoing provincial commitment to strengthen this important form of residential care for children.

The standards set out the Ministry's expectations for the level of service to be provided for children in foster care. These are derived from the best existing knowledge and practice and are important insofar as they set a benchmark against which service providers can evaluate and improve their practice. A high level of service cannot be guaranteed by regulations alone. The quality of our service depends equally as much on the commitment, skill and judgement of those providing it.

As we continue to confront the increased challenges in child welfare over the next decade, we must continually re-examine our values, our understanding and our practice. The benchmarks we set for ourselves today clearly must change and improve still further, if we are to meet the shifting demands of tomorrow. We release these standards today mindful that they are only a beginning.

I appreciate your continued interest in and commitment to this vital area of child welfare, and look forward to working with you as we strive together to meet the challenges facing us all.

Yours truly,

Robert M. McDonald
Deputy Minister.

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Written comments or inquiries concerning this paper should be directed to:

Greg O'Neill
Provincial Foster Care Coordinator
Operational Support Branch
Ministry of Community and Social Services
9th Floor, 700 Bay Street
Toronto, Ontario
M5G 1Z6

Requests for copies should be directed to:

Children's Services Section
Program Support Unit
Operational Support Branch
Ministry of Community and Social Services
9th Floor, 700 Bay Street
Toronto, Ontario
M5G 1Z6

INTRODUCTION

This paper is an executive summary of A Policy Statement on Standards for Foster Care, which presents the policy of the Ministry of Community and Social Services on standards for foster care, the primary form of residential care for children in Ontario. The standards were developed to carry out the Ministry's commitments to improve foster care through a "comprehensive, coordinated and system-wide approach" and to establish province-wide standards for children's services generally.

This summary focusses on the Ministry's approach to implementation of the foster care standards. It does not present the policy on foster care standards in detail. The reader should refer to the full policy statement for a discussion of the major service issues encountered and resolved in the development of the foster care standards.

The sections that follow cover:

- Roles and responsibilities: This section of the summary outlines the respective roles and responsibilities of the Ministry and the board of directors of an agency or operator. The developing role of Native groups in controlling foster care for Native children is also discussed.
- Ministry licensing and regulation of operators of foster homes: To clarify Ministry expectations for foster care services, a distinction has been made for licensing purposes between the practices and responsibilities of agencies placing children in care and those of operators directly responsible for selection, support and supervision of foster homes. (In most cases, the same organization will serve as both placing agency and operator.) This section states the authority for issuance of a licence to a foster care operator, defines an operator, and lists the standards that will be contained in regulations under Bill 77, the Child and Family Services Act, that an operator will be required to comply with to receive a licence.
- Terms and Conditions: This section states the mandatory terms and conditions that will be attached to every operator's licence. The board of directors of an agency or operator will review its operations with a program supervisor to ensure compliance with these standards. Because these standards cover "good practice", policy-making requirements and day-to-day management, the program supervisor and operator will negotiate the most efficient and effective way of implementing them in each agency.
- Rights of children in foster care: This section explains how the legislated statement of rights of children in care in the Child and Family Services Act applies to children in foster care and how these rights are supplemented by the foster care standards.
- Standards for placing agencies: This section outlines the application to placing agencies of standards covering the entry of the child into care, review of his stay in care and his discharge from care.

ROLES AND RESPONSIBILITIES

Ministry standards, developed in consultation with service providers, specify the criteria against which the performance of persons, agencies or programs will be measured, and thus provide the basis for holding them accountable for their performance.

The standards also reflect efforts by the Ministry to clarify the respective accountability roles and responsibilities of the Ministry and service providers. Experience in the development and implementation of standards has made clear that an excess of regulation limits flexibility and inhibits the exercise of professional judgement in the delivery of service. The standards require only that activities the Ministry believes essential to ensure the protection and well-being of children and accountability are carried out. While the standards set more precise expectations for accountability than existed in the past, the Ministry has no intention of limiting an agency's capacity for internal accountability or its responsibility for the quality and effectiveness of its service or a sense of personal and professional responsibility on the part of an individual worker.

The Ministry is responsible for the overall planning of service, for the setting of broad service goals and directions and for the provision of financial assistance to meet those goals and service directions. It is responsible for assuring that the agencies it funds function economically, efficiently and effectively.

Agencies are responsible for the quality and effectiveness of the services they provide. They also must account to the Ministry for the funds they receive and for the expenditure of those funds in an efficient and economical way. An agency's board of directors bears the responsibility for ensuring the day-to-day management of the agency including:

- establishment of service delivery goals, policy and practice
- service planning and monitoring and evaluation of clinical practice
- administration (personnel policy, staffing, supervision, etc.)
- finance (budgeting, financial control and audit).

It is not possible to determine the exact cost of implementing the standards. Because the standards reflect currently accepted good practice and because of the extensive consultation, self-assessment by agencies and voluntary implementation that have occurred, it is believed that most are in place in agencies. Thus formal implementation should involve no major cost. However, practices of agencies vary, and some agencies are not now in compliance with the standards.

The Ministry will assist agencies and operators whose practices do not comply with the standards to achieve compliance with those standards. Training supports and other assistance will be provided where the Ministry's area offices so recommend.

If an agency or an operator requires assistance in implementing standards, this should be planned and presented in the agency's or the operator's service plan. Service changes or changes in funding should be negotiated with the Ministry by the agency/operator and the area office through the service plan.

The Ministry will support the development of Native foster care as part of the development of Native child and family services. While Native-run foster care services are under development, the final foster care standards in the policy paper will apply to all agencies licensed to provide foster care for children. Native groups will be encouraged to participate in existing child welfare processes as a basis for determining those elements that are relevant to Native communities and for developing new standards that respond more effectively to Native needs. Band councils will be eligible to apply to be licensed to provide foster care under the standards that will apply initially to all foster care services.

MINISTRY LICENSING AND REGULATION OF OPERATORS OF FOSTER HOMES

Authority and responsibility for licensing under Bill 77 have been delegated to the regional and area offices of the Ministry. The legislation provides for all operators of foster homes to be licensed; an operator is a person who manages and controls foster homes where care is provided to three or more children at more than one location.

Operators of foster homes will be licensed on the basis of compliance with the minimum regulations for foster care. These reglations are few in number and consistent with the roles and responsibilities described above. The Ministry will be seeking assurance of compliance with basic requirements in the following areas:

- Classification and management of foster homes: Each operator must have a system for classification of its foster home. Each operator must keep a complete, up-to-date roster of approved homes and of placements of children in the homes.

- Support services for foster parents: Each operator must fulfill an agreement for service with every foster parent in its service. In addition to reimbursement, the agreement will cover training, supervision and relief, as well as obligations and responsibilities of either the foster parent or operator for professional consultation, attendance at clinics and conferences, court appearances and record keeping as required by the plan of care of a child.

- Planning and implementation of service for the child: Each operator accepting children for foster care placement must have a written policy specifying the criteria for selection of a suitable placement for any child. Each operator providing foster care must participate in the development of a foster care plan for each child placed in a foster home covering the duration of the child's stay in the home, and with the child and foster parents review the implementation of the plan regularly and routinely.

- Supervision: Each operator must supervise its foster homes, and make regular, routine visits to the homes.

Monitoring and licensing will be carried out by the Ministry's program supervisors. The specific standards on which issuance of a licence will depend are set out below.

REGULATIONS FOR OPERATORS OF FOSTER HOMES: LICENSING REQUIREMENTS

Foster Care Planning, Placement and Review

FP-01 **Planning for Foster Care**

FPS-01.1 The operator shall:

a) accept a child for foster care only after:

   i) A preliminary assessment of the child has been completed.

   ii) The immediate objectives of foster care for the child designed to meet the developmental, emotional, social, medical and educational needs of the child have been identified as required.

b) in planning for the child, review with the placing agency the assessment report completed within 21 days after placement of the child

c) participate with the foster parents in the finalization of the foster care plan to be completed within 30 days after the placement

d) consult with the agency and the foster parents to ensure that directly or through referral to the appropriate professional, school, clinic or hospital, as part of the foster care plan:

   i) A developmentally, physically or learning-handicapped or emotionally disturbed child who is not already receiving remedial instruction or treatment for his handicap or disability or emotional disturbance receives an evaluation and/or treatment or consultation as needed.

   ii) Each developmentally handicapped child receives an individual program plan and each physically handicapped child receives a specific plan designed with the overall goal of moving towards independence in life skills for the child and containing time-limited, measurable objectives.

   iii) A plan is developed for the supervision of each emotionally disturbed child and his foster parents that states methods to be used and supports to be provided to the foster parents in managing and caring for the child.

FP-02 Placement Selection

FPS-02.2 The operator shall select a foster family placement for a child and place the child with that family only after:

a) completion of an assessment of the family and approval of the family for fostering (SEE: SDMS-02.1)

b) disclosure to the foster parents of all information known to the operator about the child that is relevant to the care of the child (SEE: FPS-02.1)

c) agreement by the foster parents to the placement of the child on the basis of this information (SEE: FPS 02.2)

d) agreement by the placing agency to the placement.

A written statement of any needs of the child that cannot be met by this placement, of how the needs will be met and of any reservations or concerns expressed by the foster family about the placement of the child in their home shall be included in the child's file.

FP-03 Capacity of Foster Home

FPS-03.1 The operator shall ensure that no more than four foster children and no more than two foster children under two years of age are placed in a foster home, unless otherwise approved by the Director where all of the foster children are of common parentage or related to the foster parents.

FP-05 Placement

FPS-05.1 The placing agency and/or the operator shall:

a) arrange for a worker known to the child to accompany the child to the foster home on the date of the actual placement, except where the agency's and/or the operator's director or his designate approves another adult accompanying the child

b) ensure that the foster parents have received in writing by or at the time of the actual placement the health, medical and dental data necessary for the care of the child including specification of medical disorders, handicaps, allergies and limitations on activity.

FP-07 Foster Care Plan Review

FPS-07.1 The operator shall review and if necessary amend the foster care plan with the involvement of the placing agency, the child, the foster parents and the natural parents:

a) at least every three months

b) when there is a change in the child's placement.

The reason or reasons for lack of involvement of these parties shall be noted in the plan. The date of each review and any changes in the plan shall be recorded in the child's file. A supervisor shall examine the file at the time of each review to ensure that the required recording and documentation have been carried out, and shall sign and date the record.

Selection, Development and Management of Foster Homes

SDM-01 Classification of Foster Homes

SDMS-01.1 As part of its system for the selection, development and management of foster homes, the operator shall:

a) have a system for the classification and utilization of its foster homes

b) establish procedures for the recruitment, screening and selection of foster parents

c) keep up to date a list of approved foster homes

d) supervise its foster homes

e) evaluate its homes annually according to the objectives set for the type and level of care to be provided in the home.

SDM-02 Approval of Foster Homes

SDMS-02.1 The operator shall approve a home for fostering only after:

a) conducting both joint and separate interviews with each parent in a two-parent home and a minimum of one planned interview held in the applicants' home

b) meeting other members of the family and other persons living in the home

c) requesting the applicants to provide the names of at least three persons in the community who can provide references for the family, contacting these persons by letter and/or telephone and making a record of their comments regarding the suitability of the applicants for fostering

d) obtaining a written statement from a licensed physician or an individual approved by the local medical officer of health regarding the general health and specific illnesses or disabilities of foster parent applicants and family members that might interfere with fostering

SDM-03 Housing Requirements

SDMS-03.1 An operator worker shall visit the applicant's home to determine that it is suitable for placement of a foster child. The worker shall see common living areas of the applicants' home, the proposed sleeping area of a foster child, the grounds surrounding the house and play space used by children on the premises or recreational areas within walking distance. A record of the visit shall be made in the applicants' file.

SDMS.03.3 The operator shall ensure that the regular sleeping accommodation for foster children meets the following minimum specifications unless otherwise approved by the Director:

a) No rooms without windows shall be used as bedrooms.

b) No foster child shall sleep in a building detached from the foster home, an unfinished attic, unfinished basement or a stairway hall.

c) Each foster child shall have a bed appropriate to his age, a clean mattress and bedding appropriate for the weather and climate.

d) No foster child shall share a bed or the sleeping room of any adult couple or adult of the opposite sex unless the needs of an infant or illness of a child require this arrangement.

e) No foster child over six years of age shall share a bedroom with another child of the opposite sex.

SDM-07 Foster Care Service Agreement

SDMS-07.1 The operator shall conclude a written foster care service agreement with the foster parents during the approval process prior to the placement of the first foster child. The service agreement shall include:

a) the respective roles, responsibilities and obligations of the operator and the foster parents

b) support and training services provided by the operator to the foster parents during the placement of children including:

  i) frequency and form of supervision
  ii) relief services
  iii) training opportunities
  iv) professional consultation for the foster child

c) financial arrangements for the care of children:

  i) the basis for determining the amount of payment
  ii) the method of payment
  iii) frequency of payment
  iv) reimbursable expenditures

d) a statement of confidentiality signed by the foster parents

e) frequency of performance evaluation

f) the basis for termination.

The operator shall review the service agreement at least annually or at the request of the foster parent as the needs of the child dictate and shall update specific provisions as changes are made.

SDM-10 Supervision and Support of Foster Homes

SDMS-10.1 The operator shall assign a worker to supervise and support every foster family approved for placement and to arrange for the support services provided for in the service agreement. The worker shall:

a) respond to foster parent inquiries within 24 hours of the contact

b) visit a foster family home where a child is placed and talk with at least one foster parent within seven days of the placement, once again within 30 days of the placement and every three months thereafter

c) contact a family not currently caring for a child every three months.

STANDARDS FOR OPERATORS OF FOSTER HOMES: TERMS AND CONDITIONS

Final standards that do not become part of the regulations under the licensing section of Bill 77 will be mandatory terms and conditions. Every operator's licence will have the mandatory terms and conditions placed on it. Operators will be licensed on the basis of compliance with the regulations and with the terms and conditions.

The standards included in the mandatory terms and conditions are considered a part of the responsibility of the board of directors of an agency or operator providing foster care services for ensuring quality service and for managing policy and program service delivery. Since they encompass the day-to-day good practice of an agency, the ministry's program supervisor will negotiate with the board how these standards will be implemented in the agency's foster care services. Where a private operator of foster homes does not have a board of directors, responsibility for negotiating and implementing these standards rests with the operator.

Some of the standards grouped in this section of the summary appear in Bill 77 as legal responsibilities of Children's Aid Societies. They are repeated here because they apply to all operators of foster care and also because they provide a clear expectation of how the obligation for foster care is to be met. One such standard is the requirement for a complaint procedure for foster parents. This also appears in section 65 of Bill 77, which requires Children's Aid Societies to have a procedure for complaints.

Service Delivery

FP-02 **Placement Selection**

FPS-02.1 Before selecting a placement, the operator shall obtain the following background information in writing from the placing agency:

a) identifying information on the child: full name, sex, birth date, address

b) the child's family background: size, birth order, cultural, racial, linguistic, religious and socio-economic background, parental and other family relationships

c) school information: name and address of school, name of teacher, grade in school, current performance level

d) medical data: name and address of family doctor and/or hospital used, medical problems of the child including physical handicaps or limitations on physical activity, allergies, current medication, history of illness and immunization record as available

e) a description of the child's interests and any hobbies or recreational activities the child enjoys

f) a statement of the child's strengths and problems and known psychological or psychiatric information available including behaviour problems, juvenile record or unusual habits

g) a statement of the child's needs in care

h) the probable duration of foster care and the plans for parental contact and visiting of the child.

Where this information is not available at the time the placement is selected, the operator shall obtain the information from the agency by the time the assessment report is completed. Where this information cannot be obtained, the operator shall note the reason in the child's file.

FP-04 Emergency Placement

FPS-04.1 The operator shall keep up to date a list showing the number and location of beds available for emergency placement and shall make this list available to workers.

FP-06 Natural Family Involvement

FPS-06.1 The operator shall provide written policies and procedures for workers and foster families regarding the involvement of natural parents with their child in care.

FP-08 Food and Nutrition

FPS-08.1 The operator shall provide the foster parents with information on the foster child's eating habits so that the foster parents can provide foods to the child that constitute a balanced diet for him. Where a licensed physician prescribes a special diet for a foster child or special feeding arrangements are required, the operator shall provide the foster parents with instructions regarding the preparation of such a diet or the handling of the special feeding arrangements.

FP-09 Clothing

FPS-09.1 The operator shall ensure during the period while the child is in foster care that the child has a supply of clothing suitable to the child's size, age and activities, foster family norms and the climate, and that appropriate storage is provided for his clothing.

FP-10 Health Care Responsibilities

FPS-10.1 The operator shall provide written policies and procedures for workers, foster parents and natural parents stating the responsibilities and obligations of each party in regard to the provision of health care, including the administration of prescription drugs, hospitalization, medical and/or surgical treatment and emergency medical care.

FP-11 Education and Learning

FPS-11.1 The operator shall assign a worker and/or the foster parents to contact quarterly the foster child's teacher and/or school principal and/or other school personnel as necessary, to assess the child's adjustment and progress in school.

FP-12 Hazardous Goods

FPS-12.1 The operator shall have a written policy and procedural guidelines with respect to the purchase and possession of any goods for or by the foster child that pose a threat to the foster child's or the foster family's health and/or safety, and shall advise workers and foster parents of the policy and the guidelines.

FP-13 Daily Chores, Work and Use of Money

FPS-13.1 The operator shall have a written policy regarding work done and money earned by the foster child inside or outside of the foster home and shall advise workers and foster parents of the policy.

FP-14 Privacy

FPS-14.1 The operator shall have a written policy regarding the foster child's privacy in receiving and sending mail and in receiving and making telephone calls, and shall advise workers and foster parents of the policy.

FP-15 **Discipline**

FPS-15.1 The operator shall provide:

a) written policies regarding discipline that set out acceptable and unacceptable practices for workers and foster parents

b) instruction on acceptable methods of discipline to all foster parents as part of foster parent orientation.

FPS-15.2 Unacceptable disciplinary practices shall include:

a) deliberately harsh or degrading responses that could result in the humiliation of a child or the undermining of a child's self-respect

b) deprivation of basic needs including food, shelter, clothing or bedding

c) extensive and prolonged withholding of emotional response or stimulation after the undesirable behaviour of the child has stopped

d) placing or keeping a child in a locked room

e) threatening removal of the foster child from the foster home in an attempt to control behaviour

f) corporal punishment by foster parents or by another child or group of children condoned by foster parents

g) punching, shaking or shoving or other forms of aggressive physical contact.

FP-16 **Placement Change**

FPS-16.1 An operator worker shall meet with the foster child and the foster parents as soon as possible within five days of a request for a change in placement by the foster parents and/or the child to determine whether a change in placement is needed. A decision to move the child shall be made by the operator worker and his supervisor in conjunction with the placing agency.

FPS-16.2 An operator worker shall begin to prepare the foster child and foster family for any change in placement as soon as possible after the decision for placement change is made. Such preparation shall include at least one meeting of the worker with the foster child and the foster parents before the move is made. A record of the process whereby the child and the foster family were prepared for the placement change shall be made in the child's file.

Management of Foster Care Service

SDM-03 Housing Requirements

SDMS-03.2 The worker shall determine that the home:

a) has specifically designated spaces for informal living, dining, food preparation and storage, and separate rooms for sleeping and bathing

b) is equipped with a means of providing and maintaining a supply of heat to habitable rooms

c) is in a condition free of hazards to physical safety, and garbage, refuse and other wastes are disposed of in such a way as not to constitute a health hazard.

SDM-04 Emergency, Fire, Safety and Health Protection

SDMS-04.1 To protect the safety of foster children, the operator shall:

a) ensure that there is a means of communicating regularly and routinely with persons approved for fostering and every foster home has a telephone or access to a telephone except where telephone service is not available to the community

b) inform persons approved for fostering that agency policy regarding weapons is that all weapons including firearms, air rifles, bows and hunting sling shots shall be made inoperable and inaccessible to children when not in use

c) ensure that any home that is approved for foster care has a single station smoke detector with alarm device between the bedrooms and the remainder of the home approved by Underwriters' Laboratories of Canada

d) ensure before a foster child is placed that the foster parents have a procedure for evacuating the home in case of fire. The foster parents shall inform each foster child of the exit to use and how to use it in case of fire.

SDM-05 The Assessment Decision

SDMS-05.1 The operator shall complete an assessment of the foster family and their home, prepare a written report and arrange to meet with the applicants to share the content of the report within five working days of the decision to accept or reject the applicants.

SDM-06 Unsuitability of Applicant

SDMS-06.1 The operator shall have a written policy and procedures regarding acceptance or rejection of applicants and the policy shall specifically cover verified and suspected child abuse and neglect. The policy and procedures shall be made available to workers responsible for the foster family assessment.

SDM-08 Orientation

SDMS-08.1 The operator shall begin an orientation to fostering for new foster parents prior to the placement of the first foster child in the home including a minimum of one individual or one group meeting, and provide written material to foster parents on the operator's foster care policies and practices at the start of the orientation.

SDM-09 Criteria for Placement Selection

SDMS-09.1 The operator shall provide written policies stating the criteria that shall be met in the selection of a suitable placement for any child. The criteria to be used in selecting a placement shall include reference to:

a) the child's cultural, racial, linguistic and socio-economic background and kinship ties

b) the child's religious background

c) the child's developmental, emotional, social, medical and educational needs

d) the child's interests, abilities, strengths and problems.

SDM-11 Relief and Emergency Services

SDMS-11.1 The operator shall have written policies and procedures for the provision of both planned and emergency relief services for foster parents when required and shall ensure that a worker is available to respond within 24 hours to emergencies reported by foster parents.

SDM-12 Foster Parent Development

SDMS-12.1 The operator shall have written policies and practices with respect to development of its foster parents.

SDM-13 Transportation and Travel

SDMS-13.1 The operator shall advise foster parents of the operator's position regarding the arrangement of travel for foster children inside and outside of the Province of Ontario.

SDM-14 Reporting of Serious Occurrences

SDMS-14.1 The operator shall inform the foster parents in writing of the serious occurrences involving the foster child that the foster parents shall report immediately to the operator. The operator shall provide emergency telephone numbers to the foster parents to call to report serious occurrences taking place after office hours. The serious occurrences that shall be reported include:

a) the death of the child
b) serious illness, serious injury or hospitalization of the child
c) a charge under the Young Offenders Act
d) abuse or mistreatment of the child
e) apprehension by police
f) alcohol or drug abuse
g) fire or other disasters in the home
h) absences of the child without permission from the home
i) any other serious occurrence pertaining to the child.

SDMS-14.2 The operator shall report within 24 hours to the placing agency:

a) the death of the child
b) serious illness, serious injury or hospitalization of the child
c) abuse or mistreatment of the child
d) fire or any other serious occurrence concerning the child.

SDMS-14.3 The operator shall report within 24 hours to the Director:

a) the death of the child
b) serious illness, serious injury or hospitalization of the child
c) abuse or mistreatment of the child.

SDM-15 Annual Foster Home Review

SDMS-15.1 The operator shall complete an annual written review of each foster home following a minimum of one interview with the foster parents for that purpose. The review shall be signed by both the foster parents and the operator and shall be placed in the foster family's file.

SDM-16 Service Complaint from Foster Parent

SDMS-16.1 The operator shall have a written complaint process for foster parents that shall be made known to foster parents during orientation. The written complaint process shall state:

a) how to launch a complaint
b) the circumstances that would warrant an investigation of a complaint
c) who is to be involved
d) the structure of the review hearing
e) the authority of any conclusions
f) the appeal procedure.

The operator shall respond to every service complaint from a foster parent within 24 hours of receiving the complaint and begin an investigation within five working days if warranted. The results shall be reported to the foster parents within five working days of concluding the investigation and shall be recorded in the foster family's file.

SDM-17 Investigation of Complaint Against Foster Family

SDMS-17.1 The operator shall respond to every complaint against a foster family concerning the care of their foster child within 24 hours of receiving the complaint and begin an investigation within five working days if warranted. The results shall be reported to the foster parents within five working days of concluding the investigation and shall be recorded in the foster family's file. The recording shall include:

a) the circumstances of the complaint that warranted the investigation
b) who was involved
c) the structure or form of the investigation
d) the recommendation
e) the decision made or action taken.

SDMS-17.2 The operator shall have policies and procedures relating to the investigation of complaints regarding foster parent actions that contravene the provisions of FPS-15.2 (concerning unacceptable disciplinary measures). These shall be made available to workers and foster parents during orientation.

SDM-18 **Foster Home Closure**

SDMS-18.1 The operator shall provide workers with written policies and procedures for closing foster homes. In situations where the foster parents oppose the agency's decision to close their home, the procedures shall include:

(a) a minimum of one interview with the foster parents

(b) a letter signed by the operator or his designate sent to the foster parents stating that their home is officially closed and that any agreements they have entered into with the operator or its workers are terminated.

SDM-19 **Contents of Foster Child Files**

SDMS-19.1 The operator shall maintain a written case file for each foster child in care including the following:

a) admission and placement documentation:

  i) identifying information and family background information
  ii) the assessment report
  iii) a record of all court orders and a summary of juvenile court findings, where applicable
  iv) health care, medical and dental history and reports
  v) school information including copies of all school reports

b) recording of care plans and reviews, where applicable:

  i) the foster care plan
  ii) psychological, psychiatric, educational and other reports pertaining to the functioning and/or care of the foster child
  iii) in the case of a developmentally, physically, learning-handicapped or emotionally disturbed child, a copy of evaluations made and plans provided by any professional, school, clinic or hospital service
  iv) plans made with the natural parents
  v) foster care plan and placement reviews

c) recording of any serious occurrences reported by the foster parents or other persons or agencies involved with the care of the child including a description of the incident, who reported it, the date and the time.

SDM-20 Contents of Foster Family Files

SDMS-20.1 The operator shall maintain a written file for every foster family approved and open for placement of children. The file shall include the following:

a) the assessment of the foster family and their home

b) a copy of the foster care service agreement

c) a copy of every annual foster home review

d) a record of any complaint made by the foster parents

e) a record of any investigations regarding a complaint against the foster family.

SDM-21 Confidentiality of and Access to Information

SDMS-21.1 The operator shall keep all foster care records on the operator's premises and in a locked container.

SDMS-21.2 Information held by the operator on a foster child shall be available to:

a) the child of 12 years of age or older

b) the legal guardian of the child

c) authorized persons in the employ of the operator

d) the child's foster parents when they have signed a statement of confidentiality

e) other agencies, professionals or hospitals when authorization has been given following written consent to release of the information by the child of 16 years of age or older or the legal guardian of a child under 16 years of age.

SDMS-21.3 Information held by the operator on a foster parent shall be available to:

a) the foster parent, except for references and other information given to the operator in confidence

b) authorized persons in the employ of the operator

c) other agencies, professionals or hospitals when authorization has been given following written consent to release of the information by the foster parent.

RIGHTS OF CHILDREN IN FOSTER CARE

Bill 77 includes a statement of rights of children in care that applies to children in foster care. These rights are consistent with the rights stated in the original foster care consultation paper. Under Bill 77, the rights of each child in care include:

1. communication
2. personal liberties
3. a plan of care
4. food
5. clothing
6. medical and dental care
7. an education
8. recreational and athletic activities
9. participation in decision making
10. information concerning the child's rights and responsibilities.

The implementation in practice of these rights as they apply to children in foster care is discussed below. Legislated rights under Bill 77 are supplemented by the foster care standards. All operators of foster homes must adhere to these rights.

1. Communication.

The legislation states concerning rights of communication that a child in care has a right to:

- speak in private with, visit and receive visits from members of his family regularly (1)
- speak in private with and receive visits from his solicitor, another person representing the child, the provincial Ombudsman and members of his staff, and a member of the Ontario legislature or the Parliament of Canada
- send and receive mail, subject to certain restrictions.

Mail to a child in care may be opened by the service provider in the child's presence and inspected for prohibited articles. It may be examined or read if there are reasonable grounds to believe that it may cause the child physical or emotional harm, but it may not be examined or read if it is from the child's solicitor and it may not be censored or withheld from the child, except that articles prohibited by the service provider may be removed from the mail and withheld from the child.

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(1) A child in care who is a Crown ward or a Children's Aid Society ward is only entitled to speak with, visit or receive visits from a member of his family under an order for access made under the child protection section of the Act.

The final standard on privacy touches on these rights of communication. It requires the operator to have a written policy regarding the foster child's privacy in receiving and sending correspondence and in receiving and making telephone calls, and to advise workers and foster parents of the policy. The operator will be expected to reflect the child's rights of communication under the legislation and to interpret them to workers and foster parents through this policy statement.

2. Personal liberties.

On the personal liberties of the child in care, the legislation states that he has a right to:

- have reasonable privacy and possession of his own personal property
- receive the religious instruction and participate in the religious activities of his choice, subject to parental direction where the parent of the child retains a right to direct the child's religious upbringing.

The legislation also states that no service provider or foster parent may inflict corporal punishment on a child or permit corporal punishment to be inflicted on a child in the course of the provision of service to the child.

"Reasonable privacy" may be viewed as encompassing both intellectual and physical privacy. The child's rights of private communication under the legislation and the implementation of these rights through standards on privacy are discussed above. The final standard dealing with confidentiality of records permits the child aged 12 years or older access to information on himself that is held by the operator; it limits other access to information on the child to authorized persons in the employ of the operator, to the child's foster parents when they have signed a statement of confidentiality and to certain other parties with appropriate consent. In addition, the consent of the child of 16 years of age or older or of the natural parents or guardian of the child under 16 years of age is required for the transfer of information about the child.

The consultation paper indicated that certain proposals were intended to ensure a reasonable degree of privacy of accommodation for the child. A final standard requires a visit to the home of prospective foster parents to determine that it is suitable for placement of a foster child. This broadly stated requirement allows the worker to take privacy into account when determining the suitability of a home for foster care, recognizing that the degree of privacy a child requires will depend on his age and cultural background.

The importance of personal belongings for a child separated from his natural parents and home is noted in this paper as it was in the consultation paper. The position taken in developing the foster care standards is that the child should be encouraged to take belongings that are important to him to the foster home to help him see it as his home. Restrictions on what the child takes to the foster home should be limited to considerations of safety, health and the size of the item. This approach is reflected in the final standard that requires an operator of foster homes to have a written policy and procedural guidelines with respect to the purchase and possession of hazardous goods for or by the foster child.

The consultation paper stated the Ministry's position that care should be taken to respect both the religious preference of the child and/or his natural family and the practice of the potential foster parents when placing the child. A child who has previously participated in religious observance should be given the opportunity to continue to practice his religion in accordance with his personal preference or the customary practice of his natural family. Careful consideration should be given to the appropriateness of placing a child who is not from a religious background with religiously observant foster parents. In any placement, participation by the child in religious observance should be voluntary rather than compulsory.

It is required that information on the religious background of the child's family be obtained prior to selection of a foster home for the child. The prospective foster parents must receive all information known to the operator about the child that is relevant to the care of the child and the foster parents must agree to the placement of the child on the basis of this information. These requirements should ensure that the foster parents are in agreement with the child's and/or the natural family's wishes regarding participation in religious observance by the child.

It should be noted that consultation on this point revealed that some foster parents believe strongly in involving the foster children in their care in their own religious observance, holding that to do so helps the children feel accepted in and a part of the foster family. The foster family's religious practice must not supersede the preference of the child and/or his natural family. Airing religious concerns while placement with a particular foster family is under consideration will give the foster parents the opportunity to decline a placement that would not be in accord with their own religious practice.

Several of the final standards address corporal punishment in different ways. The standard dealing with unacceptable disciplinary practices expressly forbids corporal punishment as well as aggressive physical contact and deprivation of basic needs such as food, shelter, clothing or bedding. There is a standard requiring a prompt response to every complaint against a foster family concerning the care of their foster child and another requiring specific policies and procedures for the investigation of complaints alleging the use of unacceptable disciplinary practices. These requirements are, of course, in addition to those for the protection of children under Bill 77.

3. A plan of care.

The legislation states that a child in care has a right to a plan of care designed to meet his particular needs and prepared within 30 days of his admission to the placement. Further, it states that the child has the right to participate in the development of the plan of care and in any changes made in it.

These rights are reflected in several of the final standards. One requires that a preliminary foster care plan be prepared prior to selection of the placement for the child with the involvement of the child in a manner suited to the child's age and understanding. Another requires that the plan be finalized within 30 days of placement. The foster care plan must also include the long-term goals and immediate objectives of foster care for the child designed to meet his developmental, emotional, social, medical and educational needs. The plan must be reviewed regularly and if necessary amended with the involvement of the child.

4. Food.

The legislation states that the child in care has a right to receive meals that are well balanced, of good quality and appropriate for the child. A child's foster parents must receive information on his eating habits so they can give him a balanced diet, and they must be provided with special dietary information or feeding arrangements where needed.

5. Clothing.

The legislation states that the child in care has a right to be provided with clothing that is of good quality and appropriate for the child, given his size and activities and prevailing weather conditions. Clothing for the foster child must be suitable to his age and foster family norms as well as his size and activities and the climate.

6. Medical and dental care.

The legislation states that the child in care has a right to receive medical and dental care - subject to parental direction where the parent of the child retains a right to give or refuse consent to medical treatment for the child - at regular intervals and whenever required, in a community setting whenever possible. A placing agency standard covering general health, medical and dental care requires a check for evidence of injuries and communicable diseases at the time of admission to care, a complete physical examination within 30 days and annual examinations thereafter as well as regular dental care. The standard also provides for further hearing, vision, psychological and psychiatric assessments and treatments. It requires an ongoing immunization program as well, except for children whose parents provide a statement of medical or religious exemption.

7. An education.

The legislation states that the child in care has a right to receive an education that corresponds to his aptitudes and abilities, and is provided in a community setting whenever possible. Two of the standards reflect the importance of the child's education. The placing agency standard stating the requirements for assessment includes specific reference to the child's educational history and needs, as does the standard dealing with the content of the foster care plan.

8. Recreational and athletic activities.

The legislation states that the child in care has a right to participate in recreational and athletic activities that are appropriate for his aptitudes and interests, in a community setting whenever possible. Attention to the recreational needs of the foster child is reflected in several standards. The placing agency standard dealing with assessment includes play and recreational interests in the background information to be collected on the child, as well as identification of any recreational services to be continued or provided to meet the child's needs. These services and arrangements for the child must be specified in the foster care plan. The child's interests and any hobbies or recreational activities the child enjoys are listed among the background information to be obtained prior to placement selection. The final standard dealing with housing requirements for foster care provides for a check of the play space used by children on the premises or recreational areas within walking distance of a prospective foster home.

9. Participation in decision making.

The legislation states that the child in care has a right to be consulted and to express his views, to the extent that is practical, given the child's level of understanding, whenever significant decisions concerning the child are made. These include decisions with respect to medical treatment, education and religion and decisions with respect to the child's discharge from the placement and transfer to another placement.

As noted above, involvement of a child of any age in his foster care plan in a manner suited to his age and understanding is required. The placing agency must seek the agreement to the plan of the child of 12 years of age or over, and involve the child of any age in subsequent reviews of the plan. The child must be involved in the development of a plan for continuing support to the child and his natural family after discharge.

10. Information concerning the child's rights and responsibilities.

The legislation states that the child in care has a right to be informed, in language suitable for his level of understanding, on admission to the placement, of:

- the child's rights as stated in the legislation
- a written procedure that a service provider is required by the legislation to establish for hearing and dealing with complaints regarding alleged violations of the rights of children in care
- the existence of the Office of Child and Family Advocacy that may be established under the legislation
- the review procedures available in the case of a child who is in temporary detention, committed to secure or open custody or held in a place of open custody
- the child's responsibilities while in the placement
- the rules governing day-to-day operation of the residential service including disciplinary procedures.

PLACING AGENCY STANDARDS

The standards that will apply to placing agencies involve responsibility for the entry of a child into care, review of his stay in care and his discharge from care. The placing agency has the responsibility for determining the course of service for the child. The placing agency makes the decision that the child requires out-of-home care and specifically foster care, provides an assessment that in part substantiates that decision, and prepares the general plan of care for the child. The placing agency also has the responsibility for reviewing the child's placement regularly to ensure that it continues to meet his needs, and for preparing plans for transfer or discharge and aftercare as appropriate. The Ministry is considering introducing some of these requirements under Bill 77 for all children being considered for any residential placement.

These standards will apply to placing agencies either through regulations or through the management responsibility of the agencies' boards of directors.

STANDARDS FOR PLACING AGENCIES

PA-01 **Screening**

PAS-01.1 The placing agency shall have a process for screening of potential clients to determine their need for service, and shall provide written guidelines to assist workers involved in the acquisition and evaluation of information to determine the need for service.

PA-02 **Alternative Services**

PAS-02.1 The placing agency shall keep up to date a list of services in the community that assist families and children, and may be used by the agency for referral. A copy shall be made available to all workers involved in screening.

PA-03 **Assessment**

PAS-03.1 The placing agency shall:

a) conduct a preliminary assessment prior to the admission of a child to care, except in emergency situations, to determine the needs of the child and whether the child is likely to return home after residential care, which shall include the following information:

- i) identifying information
- ii) referral data (source, date)
- iii) the legal status of the child
- iv) any circumstances that have created or contributed to the need for intervention
- v) any special needs of the child arising from drug and/or alcohol use, sexual orientation, behavioural disorder, or delinquency including a juvenile record
- vi) identification and consideration first of members of the child's immediate and extended family and secondly of other adults known to the child and his natural family and who can meet the child's needs

b) complete an assessment report within 21 days after placement of the child, in the case of either a planned or an emergency placement, which shall include information in (a) and the following information:

- i) a history of the family members including social stresses, personality characteristics and current functioning related to health, work, adequacy and management of income, marital status, family relationships, family dependencies and community relationships
- ii) the personality, characteristics and habits of the child including current physical, social, emotional, and intellectual development, educational history, and current functioning related to health, home routines, school activities and play, recreational or social interests, relationships with family members and peers, attitude towards discipline and parental control
- iii) any inadequacies in the child's home that are judged to be emotionally and/or physically detrimental to the child
- iv) any emotional, physical or developmental handicaps or problems of the child that preclude the child's care, management or treatment in his own home
- v) significant events occurring in any previous placement
- vi) the child's history of emotional attachment, his potential ability to deal with the experience of separation from his natural parents, and to benefit from living with another family, and his understanding of the situation
- vii) any psychiatric, psychological, remedial, vocational, social and recreational services to be continued or provided to meet the child's needs.

The reason or reasons for inability to obtain any of the above information shall be noted in the assessment report. Where an assessment report could not be completed within 21 days after placement, the reason or reasons shall be noted in the child's file.

PA-04 Criteria For Out-of-Home Care

PAS-04.1 The placing agency shall provide written criteria for determining the necessity for the use of out-of-home care including foster care and children's residential care facilities.

PA-05 The Decision to Place the Child in Care

PAS-05.1 The decision to place a child in care shall be made in a meeting including no fewer than the worker completing the assessment and a supervisor. Where the decision cannot be made in such a meeting, the worker shall inform the supervisor of the placement as soon as possible thereafter. The decision to place the child shall be recorded in the child's file and, where applicable, in the family's file and shall be signed by the supervisor.

The Foster Care Process

PA-06 Foster Care Plan

PAS-06.1 The placing agency worker in consultation with his supervisor shall:

a) prepare a written preliminary foster care plan for the child prior to selection of the placement for the child with the involvement of the child in a manner suited to the child's age and understanding

b) seek the agreement to the plan of the child's natural parents and of the child of 12 years of age or over

c) finalize the plan within 30 days of placement after consultation with the operator and the child's foster parents

d) obtain the agreement of the operator and the foster parents to the plan.

PAS-06.2 The placing agency worker shall include in the foster care plan:

a) the anticipated duration and planned outcome of the placement: return to natural parents, independence, permanent foster care placement or adoption

b) the long-term goals and immediate objectives of foster care for the child designed to meet his developmental, emotional, social, medical and educational needs

c) the respective individual responsibilities of the child, the natural parents, the operator, the foster parents and placing agency in achieving the objectives

d) the time period within which the outcome of each objective set is to be met

e) the methods for developing and/or maintaining the relationship between the child and his natural parents, specifically to include work with the natural parents to make the necessary changes in the home so that the child may return to their care as soon as possible, and visiting by the child with the natural parents and family

f) the approach or approaches to discipline to be followed with the child

g) arrangements for informing the school the child currently attends of the transfer of the child to the foster home and where it is appropriate for the child to attend a different school, for enrolling the child in that school

h) a list of any psychiatric, psychological, remedial, vocational, social and recreational services to be provided to the child by the operator or any other agency or individual professional, and arrangements for the child to attend the services

i) the frequency, intensity and form of casework to be provided by the placing agency worker during the child's stay in the foster home, which shall include a visit by the worker with the child at least:

  i) once within the first seven days of placement
  ii) once again within the first 30 days of placement
  iii) once every three months thereafter.

The foster care plan shall be recorded in the child's file. Inability to obtain the agreement of the natural parents or the child of 12 years of age or older shall be noted in the plan. A copy of the plan shall be provided to the operator and the contents of the plan shall be shared with the foster parents, the natural parents and the child of 12 years of age or older.

PA-07 Preparation for Separation

PAS-07.1 The placing agency worker shall prepare the child and his natural parents for the separation of the child from them and shall include:

a) in consultation with the operator, a pre-placement visit by the child with the foster family in their home

b) recording in the child's file of the manner in which the process of separation was carried out and the reactions of the child and his natural family.

Where a pre-placement visit by the child to the foster home does not take place, the reason or reasons why shall be noted in the child's file.

PA-08 General Health Care and Medical and Dental Services

PAS-08.1 The placing agency shall ensure that the following medical and dental requirements are met for children in care:

a) determination at the time of admission of:

   i) evidence of serious bruising or significant injuries, and where there are specific indications that suggest either a medical examination or treatment is urgently required for the child, provision for the examination or treatment

   ii) symptoms of communicable or contagious diseases or indications of exposure to communicable or contagious diseases within 21 days prior to placement

b) a complete physical examination by a licensed physician or a registered nurse registered under the Health Disciplines Act, R.S.O. 1980, c. 196 within 30 days of admission to foster care and annually thereafter

c) a dental examination by a licensed dentist within six months prior to admission or within the first three months after admission or as soon as practicable thereafter for children three years of age and older and at least annually thereafter

d) further assessment and treatment of hearing and vision if indicated and psychological and psychiatric assessments and treatments where necessary and available

e) establishment of an ongoing immunization program, except for children whose parents provide a statement of medical or religious exemption

f) inclusion in each foster child's file of cumulative health and dental records stating the date, the name of the physician or dentist or other professional licensed or registered under the Health Disciplines Act, R.S.O. 1980, c. 196 and treatments provided the child while in the care of the operator.

PA-09 Provisional Homes

PAS-09.1 Where any child is in a home on a provisional basis, the placing agency shall ensure that:

a) A worker visits the home as soon as practicable within 24 hours, unless otherwise authorized by a supervisor or his designate, to determine that the home is free of hazards to health and physical safety and has a means of communicating with the placing agency

b) The provisional parents are informed in writing of the serious occurrences involving the child that the provisional parents shall report immediately to the placing agency and are provided with emergency telephone numbers to call to report serious occurrences taking place after office hours. The serious occurrences that shall be reported include:

  i) the death of the child
  ii) serious illness, serious injury or hospitalization of the child
  iii) a charge under the Young Offenders Act
  iv) abuse or mistreatment of the child
  v) apprehension by police
  vi) alcohol or drug abuse
  vii) fire or other disasters in the home
  viii) absences of the child without permission from the home
  ix) any other serious occurrence pertaining to the child.

c) Within 30 days of the first visit by the worker, the following requirements are fulfilled:

  i) a further visit with at least one parent within seven days and where there is another parent, with the other within 30 days
  ii) commencement of an assessment to determine that the parents are appropriate persons to care for the child
  iii) work with the provisional parents to develop or revise a plan for the child, and agreement of the provisional parents to the plan.

d) An arrangement is made with the parents in the provisional home for support services to be provided during the child's stay in their home.

e) The home continues to be visited by the placing agency once every three months thereafter.

PA-10 **Emergency Placement**

PAS-10.1 The placing agency shall provide a written policy and criteria for emergency placement to assist workers to determine when emergency placements may be undertaken. Where removal of a child from the care of his parents in an emergency is being considered, the procedures shall include but not be limited to the following:

a) The worker shall consider first an arrangement for the child to live with members of his immediate and extended family. If an arrangement for the child to live with family members cannot be made or is not appropriate, a living arrangement shall be considered secondly with adults known to the child and his natural family and who can meet the child's needs.

b) If placement is required the worker responsible for placement shall be provided with all available data on the child.

c) The worker shall determine the need of the child for medical and/or psychiatric assessment at the time of emergency placement to establish whether the child requires specialized care, treatment or placement, arrange for such assessment and record the decision in the child's file.

d) The worker in consultation with a supervisor shall record in the child's file within five days:

   i) the circumstances that resulted in emergency placement
   ii) the location of the child
   iii) the probable duration of the child's stay in emergency placement
   iv) the long-term goals and immediate objectives of the placement for the child designed to meet his developmental, emotional, social, medical and educational needs.

PA-11 **Placement Review**

PAS-11.1 The placing agency with the operator shall review the progress of each child in residential care every three months for the first year the child is in care and annually thereafter, or when there is a change in the legal status of the child or the availability of the natural parents or when there is a change in court order regarding the involvement of the natural parents. The review shall be recorded in the child's file and include:

a) a statement of the factors necessitating residential care for the child

b) a statement regarding any change in the conditions that originally necessitated residential care

c) any changes in the duration and planned outcome of the placement

d) the progress of the child towards objectives set for the child

e) a description and evaluation of the child's adjustment to the placement in terms of resolving separation from his natural parents, adaptation to daily life in the placement, attendance and progress in school and participation in recreational and other leisure time activities

f) the degree of natural family involvement achieved

g) a description of any child behaviour problems and management methods or procedures used and the results

h) a statement of purpose for the continuation of residential care for the child and the objectives to be reached during placement.

PA-12 Placement Change

PAS-12.1 Where a decision is made to change the placement, the placing agency shall inform the child's natural parents unless the parents' whereabouts are unknown, the parents are unavailable or they have not been involved with the child either by choice or by court order. The reason for not informing them shall be recorded in the child's file.

PA-13 Informing Natural Parents of Serious Occurrences

PAS-13.1 The placing agency shall inform the natural parents or legal guardian of a child in care within 24 hours or as soon as possible thereafter of:

a) the death of the child

b) serious illness, serious injury or hospitalization of the child.

Wherever possible the placing agency shall inform the natural parents in person of the serious illness, serious injury, hospitalization or death of a child in care.

PA-14 Preparation for Discharge

PAS-14.1 The decision to discharge or transfer a child from foster care shall be made by a placing agency worker and his supervisor in consultation with the operator. The worker shall prepare a plan for discharge or transfer which shall be recorded in the child's file and signed by the operator. The plan shall include:

a) the circumstances or conditions that have changed resulting in the discharge

b) the process by which the separation of the child and his foster family will be addressed

c) the date when the discharge will take place

d) the special needs of the child that must continue to be met after discharge

e) the name, relationship and current address of the person to whom the child will be discharged or the address of the child's new residence where independent living is planned.

PA-15 Transfer of Records

PAS-15.1 The placing agency shall transfer or arrange for the transfer of information relevant to the care of the child that the agency has developed or confirmed when the child enters care in a residential facility or supervision of the placement is assumed by another agency. The agency shall obtain the written consent to the transfer of information of:

a) a child over the age of 16 years

b) the natural parents or legal guardian of a child under the age of 16 years.

PA-16 Aftercare

PAS-16.1 The placing agency shall ensure that a written aftercare plan is developed prior to the termination of residential care for the child. A statement of the goals of aftercare, the services or casework to be provided and the duration of the plan shall be included. A date for discharge of the child from the care and supervision of the agency shall be projected. This plan shall be shared with the natural parents where appropriate and with the child.

PAS-16.2 The placing agency shall involve the operator, the foster parents, the foster child and the natural parents, where the foster child is returning home, in developing a plan for continued support to the child and his natural family after discharge. The specific recommendations shall be recorded in the aftercare plan.

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Ontario
Ministry of
Community and
Social Services

April 1985

A Policy Statement on *Standards for Foster Care*

Ontario
Ministry of
Community and
Social Services

Deputy Minister

416/965-2344

Hepburn Block
Queen's Park
Toronto, Ontario
M7A 1E9

April, 1985

Dear Friends,

I am pleased to release A Policy Statement on Standards for Foster Care. The release of this document marks the culmination of a comprehensive consultation process on practices and procedures necessary to ensure a uniform, minimum standard of foster care service throughout Ontario.

The conscientious participation of all those who responded reflects a high level of commitment to the children and families who benefit from these services, and also to the principles of good foster care. I am confident that your valuable contributions have resulted in significant improvements to the final standards, and ultimately to the provision of better foster care services in our province.

Since the release of Foster Care: A Discussion Paper in 1979, the Ministry, agencies and foster parents have been exploring ways to implement a series of initiatives to improve foster care service delivery. The establishment of these standards is yet another part of an ongoing provincial commitment to strengthen this important form of residential care for children.

The standards set out the Ministry's expectations for the level of service to be provided for children in foster care. These are derived from the best existing knowledge and practice and are important insofar as they set a benchmark against which service providers can evaluate and improve their practice. A high level of service cannot be guaranteed by regulations alone. The quality of our service depends equally as much on the commitment, skill and judgement of those providing it.

As we continue to confront the increased challenges in child welfare over the next decade, we must continually re-examine our values, our understanding and our practice. The benchmarks we set for ourselves today clearly must change and improve still further, if we are to meet the shifting demands of tomorrow. We release these standards today mindful that they are only a beginning.

I appreciate your continued interest in and commitment to this vital area of child welfare, and look forward to working with you as we strive together to meet the challenges facing us all.

Yours truly,

Robert McDonald

Robert M. McDonald
Deputy Minister.

PREFACE

This paper presents a policy statement by the Ministry of Community and Social Services concerning the standards to be maintained in foster care services in the province of Ontario. Foster care is the primary form of residential care for children who require care outside their family homes. Ranging in age from infancy to late adolescence, they require a variety of foster care placements suited to their individual needs. Approximately 7,000 children were in foster care in Ontario at any one time in 1984. A paper released in October 1981, Foster Care: Proposed Standards and Guidelines for Agencies Placing Children, contained proposals designed to apply to more than 60 agencies and organizations currently serving children in foster care in Ontario, and was the basis for extensive consultation on standards issues.

This policy statement was developed through a review of comments on the proposals gathered through consultation meetings and written responses and an analysis of the findings of a related research project on foster care. Selected final standards will be incorporated in regulations and will be used in determining the eligibility for a licence of operators of foster homes.

To all those who took part in the consultation meetings on the proposed standards and to all those who submitted written responses to the proposals, the Ministry wishes to express its deep appreciation and gratitude. The thoughtful contributions of the participants in the consultation process were of vital help to the Ministry in determining the final standards.

Written comments or inquiries concerning this paper should be directed to:

Greg O'Neill
Provincial Foster Care Coordinator
Operational Support Branch
Ministry of Community and Social Services
9th Floor, 700 Bay Street
Toronto, Ontario
M5G 1Z6

Requests for copies should be directed to:

Children's Services Section
Program Support Unit
Operational Support Branch
Ministry of Community and Social Services
9th Floor, 700 Bay Street
Toronto, Ontario
M5G 1Z6

Members of Foster Care Standards Advisory Committee

Robert K. Glass
Director
Corporate Policy

Judyth Gulden
Foster Care Coordinator
Northern Region

Holly Goren Laskin
Project Leader
Operational Support Branch

Elaine Laurier
Foster Care Coordinator
South-east Region

Clifford Lawson
Foster Care Coordinator
Central Region

Betty Lou Lynn
Project Leader
Operational Support Branch

Sheine Mankovsky
Project Manager
Standards Development Unit

Stephen Martin
Program Analyst
Financial Planning and Corporate Analysis

Peter McDonald
Foster Care Coordinator
South-west Region

Roger Meskis
Foster Care Coordinator
South-west Region

Greg O'Neill
Provincial Foster Care Coordinator
Operational Support Branch

Paul Siemens
Manager
Children's Policy Development

Mary J. Thelander
Manager
Standards Development Unit

Karen Tilford
Project Officer
Operational Support Branch

Andrea Walker
Solicitor
Legal Services Branch

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1. DEVELOPMENT OF THE FINAL STANDARDS FOR FOSTER CARE

The establishment of standards for foster care is part of a major provincial commitment to the strengthening of this primary form of residential care for children. This chapter of the policy statement reviews the Ministry's efforts to establish standards for children's services in Ontario in general and foster care services in particular in sections that discuss:

- the reasons for establishing standards for foster care in Ontario
- the foster care research project and the standards
- the development and implementation of standards and guidelines for children's services
- the purpose and results of consultation on the proposed foster care standards and guidelines.

The Need For Foster Care Standards in Ontario

Plans for standards for foster care were made to carry out the Ministry's commitments to improve foster care through a "comprehensive, coordinated and system-wide approach" and to establish province-wide standards for children's services generally.

The need to reverse a decline in the number of foster homes available was identified as a major issue in the 1979 Ministry publication, Foster Care: A Discussion Paper. Most placing agencies had been unable to recruit and maintain enough foster homes to serve growing numbers of adolescents, sibling groups and emotionally disturbed and handicapped children requiring foster care. The decline appeared to be related among other factors to the image of foster care, to the placement and supervision procedures employed by agencies, and to the attitudes and practices of agency workers. Improved support and training for foster parents were seen as essential for the development of a range of services that would meet the needs of the difficult children coming into care.

Also, the public consultation on a paper on standards for group residential care, released in 1978, had highlighted the need to develop a separate and distinct set of standards as supports for foster care. The proposed standards for residential care facilities were considered inappropriate for foster homes, since foster care focusses on the integration of the individual child into a normal family setting and residential programming, while it may be based on either a parent model or a staff model, is planned for a group. The standards for residential care facilities were also seen as potentially burdensome and in some cases excessive for foster care.

Developed by Ministry staff following a review of relevant literature and preliminary consultation with placing agencies and foster parents, the consultation paper, Foster Care: Proposed Standards and Guidelines for Agencies Placing Children, was released in October 1981. It was the first comprehensive attempt to set out practices and procedures believed to be essential for quality foster care in the province of Ontario.

The Foster Care Research Project and the Standards

Another recent initiative in the foster care area is a research project that was set up to identify the operational, organizational and clinical practices and structures that result in the delivery of good foster care service. The study was a descriptive analysis of the foster care system during 1982-83. Its aim was to construct a model or models of a successful foster care system.

The need for a study of the system and structure for the delivery of foster care practices was identified at the time the proposed foster care standards and guidelines were developed. The proposed foster care standards and guidelines set out the practices believed to be essential for the provision of foster care. The research project was planned to take a systems approach and to focus on the kinds of structures or organization that seem to facilitate the delivery of these practices.

Thirty foster care placing agencies and operators of foster homes were involved in the study. Foster care agencies were classified according to their relative success on independent measures for the child, natural family, foster family worker and agency, and interviews and written questionnaires were used to collect information on their practices, procedures and structures. The subsequent analysis identified the practices, structure and procedures of the more successful agencies as the basis for developing the model for foster care reported in the study results.

The full results of the study are available in the report entitled An Analysis of Foster Care Practice in Ontario. The report provides guidance on one way to set up and deliver the practices contained in the proposed standards and guidelines and in the final standards.

Standards and Guidelines

In addition to constituting one of the Ministry's major initiatives in the foster care area, the standards are part of a broad effort to ensure minimum acceptable standards for children's services in Ontario. This section of the paper describes:

- the functions of the standards and guidelines being developed for children's services
- standards developed for other children's services areas
- roles in developing and maintaining standards.

The Functions of Standards and Guidelines

Accountability on the part of either an individual or an organization implies not only the liability, but also the capacity to be held to account for the performance of a given responsibility. Standards as defined by the Ministry specify the criteria against which the performance of persons, agencies or programs will be measured and thus provide the basis for holding them accountable for their performance.

Standards as so defined must be expressed in precise, measurable terms. To have meaning as accountability measures, standards must be derived from the best existing knowledge and be based on agreed-upon definitions and precise measurements.

The standards currently being developed for children's services in Ontario are intended to define clearly and consistently the Ministry's expectations concerning the minimum acceptable quality of service to be provided to children and their families. They address:

- the need for clearly defined descriptions of programs and for consistency and congruence of the activities undertaken to deliver these programs
- a necessary minimum state or level of performance.

The standards are expressed in measurable terms, and set out the minimum levels of performance that will be required of agencies. Ministry-operated programs as well as programs licensed by the Ministry are required to comply with the standards.

It should be stressed that the standards require only that activities the Ministry believes essential to ensuring the protection and well-being of children and accountability are carried out. There is no intention to dictate organizational practices. It is expected that requiring agencies to develop stated policies and procedures and to introduce certain functions where these have not existed will yield the following benefits:

- better programming to meet the needs of children and their families
- protection for staff in the performance of their responsibilities
- more efficient operation and use of both internal and external resources.

Guidelines which are developed as part of the Ministry's standard setting process contain less rigorously measurable provisions than standards and compliance with guidelines is not required. Unlike standards, guidelines are not used as the basis of a service review. They are intended to serve different and more varied purposes than standards. Their first purpose is to set out preferred levels of performance that agencies can use for self-assessment purposes. As the consultation paper stated, guidelines suggest ways in which compliance with standards may be achieved.

Guidelines also serve as a basis for consultative and developmental relationships among service providers, Ministry field staff, parents and the community. Many aspects of the quality of care are not easily regulated. In these areas significant benefit is more likely to be achieved through consultation and developmental activities than through regulation.

The proposed foster care standards and the supporting guidelines were written to establish a model or process against which agencies could compare and assess their foster care programs. In the consultation paper, the Ministry stated that program supervisors would work with agencies to implement those standards and guidelines that both agencies and program supervisors believed would enhance the delivery of foster care services. The experience thus gained was expected to help the Ministry determine the regulations needed for foster care services.

This policy paper focusses on the revisions of the standards and the approach being taken towards regulation and other means of ensuring accountability. It discusses the proposed guidelines only as they relate to final standards.

Standards Development in Other Areas

Several sets of standards and guidelines have been developed by the Ministry for children's services in addition to those for foster care. The areas covered are the following:

- Children's residential care facilities: In 1978, the Ministry released a consultation paper, Children's Residential Care Facilities: Proposed Standards and Guidelines, containing proposals recognizing the similarity of the basic needs of all children and designed to apply to all residential settings for children within the Ministry's jurisdiction. These range from small, family-style group homes to large, staff-model institutions. Standards of various kinds had been enforced through regulations made under the different Acts that historically governed the facilities. These standards focussed on physical concerns, primarily on the safety and health of children in care. Little reference was made to the programming required to meet the children's needs or to such essential management functions as planning and budgeting. In addition, the regulations under the different Acts were inconsistent, treating the same areas in different ways. Following consultation, the proposed standards were revised, incorporated into regulations under the Children's Residential Services Act, and phased into effect starting in 1981. In developing the final standards, the Ministry sought to reduce the overall volume and the specificity of the proposed requirements, retaining those standards it considered essential to ensuring the protection and well-being of the children in care and adequate monitoring of the service provided.

- Day nurseries: A paper released in 1980 proposed standards and guidelines for day nurseries services. The paper proposed for the first time to cover private-home day care under agency supervision as well as services provided in day nursery centres. The proposals recognized the importance of the early years of the development of the child and were intended to ensure that these services provide a safe, healthy and stimulating environment for the children in their programs. Revised following consultation, the standards were incorporated into regulations under the Day Nurseries Act in 1983.

- Child abuse: Issued in 1981, the Standards and Guidelines for the Management of Child Abuse Cases under The Child Welfare Act, 1978 by the Children's Aid Societies were developed to implement the recommendations of the Report of the Task Force on Child Abuse. The purpose of the standards and guidelines is to make the investigation and case management of child abuse cases by the Children's Aid Societies as uniform as possible throughout the province. At present, the Ministry is relying on the cooperation of the Societies in complying with these standards and for this reason, they have not been incorporated into regulation. The intention is to review the standards and guidelines on a regular basis to ensure their appropriateness.

- o Camping programs: In 1980, following consultation with camp operators, the Ministry published The Outdoor/Wilderness Programs Handbook, setting out in guideline form recommended camping safety and environmental protection measures originally proposed for programs for children with special needs. The handbook is intended to provide operators of camping programs in general with the basis for assessing the adequacy of their current safety provisions and for determining needed improvements.

In addition, proposed standards and guidelines for individual program planning for developmentally handicapped people, which are intended to apply to both children and adults, are contained in a consultation paper released by the Ministry in 1983. The proposals are directed towards Ministry-funded facilities and services operated under the Homes for Retarded Persons Act, the Developmental Services Act and the Vocational Rehabilitation Services Act.

Roles in Developing and Maintaining Standards

In the 1981 policy paper containing the final standards for children's residential care facilities, the Ministry stated that because of its ultimate accountability to the public for the quality of the services it licenses, provides or funds from taxpayers' money, the Ministry would retain final responsibility for developing standards for children's services and for ensuring compliance with the standards. The Ministry recognized, however, that development and refinement of standards and achievement of both compliance with the standards and improved quality of service are ongoing processes that depend on a partnership between the Ministry and the children's services field. The Ministry intends a continuing role for the field in the development, updating and revision of standards, through participation in working groups and consultation on the appropriateness of standards and on their impact once implemented.

The 1981 policy paper on residential care standards made clear that in setting out more precise requirements for accountability, both to the Ministry and within agencies, than have generally been contained in regulations governing children's services in the past, the Ministry has no intention of limiting agencies' capacity to develop internal procedures suited to their particular operations. The Ministry sees these requirements as in no way detracting from the importance of an agency's initiative in establishing internal accountability or its responsibility for the quality and effectiveness of its service, or a sense of personal and professional responsibility on the part of the individual worker. It is expected that agencies will continue to operate internal reporting systems, just as agencies and individual workers will continue to engage in self-assessment. The standards and guidelines will assist agencies where such policies and practices have not existed to strengthen internal responsibility.

The Consultation Process

The standards and guidelines proposed in the foster care consultation paper set out practices and procedures believed necessary for ensuring a uniform standard of service and for developing quality foster care in all regions of Ontario. This comprehensive and detailed catalogue of practice was intended to serve as the basis for a long and thorough discussion of what the essential practices and minimum levels of service in foster care should be.

The paper was also intended for use as an aid in training staff in basic procedures. In addition, it was hoped that it might help agencies develop criteria for staff selection, curricula for training and foster care service plans.

A phased consultation process including a series of meetings with interested groups and individuals was conducted from October 1981 through May 1983. The meetings gave participants the opportunity to familiarize themselves with the proposals and to respond informally before making written submissions. Many groups and individuals were contacted and provided with the consultation paper, including:

- foster parent associations and individual foster parents
- agencies providing foster care services
- provincial organizations and interest groups
- individual professionals from various fields, including health, mental health, social work and education
- other provincial ministries.

Those groups most directly involved in the foster care service system - placing agencies and foster parents - were consulted first through extensive discussions held across the province from October 1981 through May 1982. These meetings helped identify essential practices, as well as those of the proposed standards that appeared unworkable or too costly for agencies.

From May 1982 to May 1983, meetings were held across the province with interest groups, associations and individuals to obtain views of the foster care system from a broader perspective. Opportunities for discussion were also provided through workshops at association conferences and staff training seminars.

Representatives of Indian bands and communities were brought together to discuss the proposals in several locations. Native foster parents and staff of some Children's Aid Societies were specifically asked to comment also. In addition, the process of consultation with Native people on the Child and Family Services Act included an analysis and discussion of the foster care proposals.

In March 1983, the Ministry distributed the Interim Report on the Status of the Consultation with Placement Agencies on the Proposed Standards and Guidelines for Foster Care. The report summarized the issues raised by the placing agencies as of that date, and indicated those areas of the consultation paper with which there was general agreement and those that remained problematic.

While participants in the consultation process were asked to submit their written comments by May 30, 1983, submissions received after that date were catalogued and given full consideration. Appendix A lists those who formally responded in writing.

Both the comments recorded at the consultation meetings and the more formal written responses of the participants have been carefully reviewed. The Ministry has given full consideration to these comments in deciding which proposals to retain among the final standards and how to revise them. The final standards in this paper include proposals that the Ministry believes are necessary and workable. A number of the proposals have been eliminated as impracticable, intrusive, too onerous, or redundant. An effort has been made to consolidate and simplify the remaining standards in the interest of practicability and clarity.

Self-Assessment and Implementation of Good Practice

Consultation with placing agencies was followed by a process of self-assessment and implementation of good practice by agencies. Its purpose was to encourage agencies to bring their practices closer to the proposed standards on a voluntary and gradual basis before they were required to comply with them through regulation. During this phase, agencies and foster parents reviewed existing foster care practices against those set out in the proposed standards and guidelines and implemented selected practices they believed would bring about an improvement in their service and could be readily implemented with the existing budget and staff. Agencies were assisted in the process by the Interim Report. Feedback received by the Ministry as agencies attempted to implement proposals with which they agreed in principle assisted the Ministry in making changes in the final standards.

2. MAJOR POLICY DIRECTIONS FOR FOSTER CARE

The consultation paper stated the goals of the Ministry in developing standards for foster care, proposed statements of rights for children in foster care, foster parents and agency workers, and viewed foster care as a process with key decision and control points. The paper singled out for discussion a number of foster care issues deserving special attention, and the process of consultation, as expected, identified others of concern to people and agencies involved in the provision of foster care. This chapter focusses on these and other broad foster care policy issues raised during consultation and the Ministry's subsequent policy decisions. The policy directions described in this chapter involve:

- the goal in setting standards for foster care
- the foster care process
- the roles of foster parents and staff
- the involvement of natural parents with the child in foster care
- foster care for native children
- privacy and confidentiality of information
- discipline.

The next chapter discusses issues in implementation of the foster care standards as they relate to implementation of the foster care policy.

The Goal in Setting Foster Care Standards

The Ministry's expressed aims in setting standards for foster care appear to have received general acceptance and approval. On reviewing the original goal statements, however, it seems appropriate to reformulate them to reflect the primacy of the child's interests and the central importance of the broader and deeper purpose of foster care itself. This is to ensure the growth and development of the child in a setting that is both suited to the child's needs and stable until a permanent resolution of the child's situation is achieved.

Given these considerations, the goal in setting standards for foster care is to ensure that all agencies involved in placing and providing care for foster children safeguard the child's physical and emotional growth and development, maintain (1) his attachment to his natural family, where appropriate, and make provision for quality care in a safe, caring and nurturing foster family home.

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1. For simplicity, the singular pronouns "he", "him" and "his" are used throughout this paper as they were in the consultation paper, although the material applies equally to males and females. Similarly, foster parents are usually referred to in the plural, but a single person may be a foster parent, and this should be kept in mind when reading the text.

The objectives in support of this goal in setting standards for foster care focus on foster families and the agency workers who work with them. These are:

- to ensure that all agencies involved in placing and providing care for foster children select foster families who will most appropriately meet the conditions necessary for the care and development of a child, and provide continuing support services to sustain those foster families
- to ensure that all agencies involved in placing and providing care for foster children provide orientation, training and supervision to the workers on their staff, so that those workers are competent to facilitate care and activities relevant to the child's needs.

Foster Care as a Process

The consultation paper presented foster care as a process with key decision points. It described foster care as "a process that begins when the question is asked whether to separate the child from his natural parents and involves the integration of the child into a substitute family, ending when the child is stabilized in his natural family, placed for adoption or becomes legally independent". The paper stated that the process encompasses "the initial decision regarding the desirability of the child entering foster care, the plan for integration of the child into a foster family and the termination of care. This approach is a result of taking the child's rather than the agency's perspective of foster care. The intention is to improve the outcome of care for the foster child by requiring an examination by the agency of all the decisions related to the child's entry, placement and termination of care". The proposed process standards, the paper said, would establish a comprehensive framework for the operation and management of foster care service, introducing requirements in areas where none had been expressly stated in the past. The consultation demonstrated wide acceptance of the concept of foster care as a process and the importance of considered decisions to the outcome of foster care for the child. The final standards in this paper reflect the concept of foster care as a process as set out in the original proposals.

A number of responses to the proposals rightly pointed out that the process as set out in the consultation paper contained elements of good case management practice that are not exclusive to foster care. Indeed, processes such as screening and assessment should be required for all potential clients prior to any service decision.

The foster care process embodied in the final standards encompasses only the decisions that are made after the initial decision has been made to place the child in foster care and before the child is discharged from foster care. These selected foster care process standards will become part of a foster care regulation, as stated in the consultation paper. In addition, the

Ministry will consider introduction under the Child and Family Services Act of requirements for both pre-placement and aftercare practices of placing agencies, to safeguard the interests of all children being considered for any residential placement.

The Role of Foster Parents

The role of the foster parents as presented in the consultation paper was that of "colleague" of the placing agency in the provision of service rather than solely the traditional role of substitute parent. The worker and the foster parents work together to meet the objectives of foster care for the child; the foster parents are "integral members of a team who know and understand the foster child and whose opinion must be sought in planning and making decisions that affect the foster child's progress and stay in care". The paper said that foster parents should be seen "as providing support for and extending the natural family function as much as possible", one of their most important responsibilities being to "encourage positive aspects (where they exist)" of the child's relationship with his natural parents. This approach to the foster parents' role, the paper said, recognizes that "many of the changes that take place in (the child's) life come about because of his relationship with his foster parents (who) provide the stability and continuity the child needs". In this approach, the placing agency "confirms its trust and acceptance of the foster parents as colleagues by sharing information pertinent to the care and nurturing" of the foster child. The paper acknowledged that this position did not have universal support.

In general, the responses from both placing agencies and foster parents endorsed the concept of a collegial relationship between foster parents and agency workers, with increased input from foster parents in foster care decision making. There was some disagreement, however, with "what might be described as a professional or quasi-professional view of foster parents" and with a perceived intrusiveness into the daily lives of foster families, as being likely to cause difficulty in recruiting and retaining some foster parents.

One objection, for example, was that standards must not work towards the "institutionalization" of foster care. Standards were seen as having the potential to disrupt the normal day-to-day functioning of foster families. Likewise, it was objected that the proposals promoted the notion of foster parents as co-workers entitled to full disclosure of information, but the standards would subject them to constant checks and investigation, using worker "time that could be better spent on nurturing the personal growth and development of foster families as resources for children who need substitute families" and in implementing placement plans.

Some agencies expressed concern that the proposed emphasis would make it difficult to attract and keep foster parents. One submission expressed concern that "many foster parents do not wish to move into a role that would require heavy participation in agency meetings, clinical decision making, etc.". As another put it, "we foresee many of our 'traditional' foster parents being unable or unwilling to assume the responsibilities that are inherent in such a concept. Moreover, we are strongly of the view that within such a framework we would find it extremely difficult to recruit new foster parents and those who are recruited would likely want to view their relationship with the agency as a 'paid job'. We continue to believe that for many children there is something very healthy about the 'traditional... substitute parent' role of foster parents which is dismissed rather quickly".

A related concern was the possible legal liability of foster parents who care for a child on a day-to-day basis in a collegial system: would legal responsibility for decision making be recognized as resting with the placing agency? One submission expressed the view that "the foster parent role is one which accepts responsibility for the primary relationship with the child and that the caseworker role includes the acceptance of full legal and social responsibility for overall casework decisions. In summary, we do view foster parents as colleagues, but colleagues who carry different primary responsibilities from staff".

It must be emphasized that the direction in foster care is towards greater expectations not only for foster parents but also for foster care practice generally. The Ministry believes that this is essential, given the commitment in children's services to helping children remain with or return to their natural families wherever possible and given the needs of the significant proportion of children coming into care who are adolescents or handicapped or emotionally disturbed. Provision of primary care will continue to be a basic part of fostering but foster parents will also play an expanded, more responsible and demanding role, with greater input into decision making for the future of the children in their care and greater involvement with the children's natural parents where this is indicated.

Foster parents have brought to their traditional role dedication of a high order. The standards are designed to assure both present and potential foster parents of the confidence to meet the demands of their changing role by requiring the necessary orientation, training, support and links to specialized services for foster parents. The standards recognize the crucial part played by the foster parents in the care and nurturing of the foster child. The placing agency facilitates and supports the relationship between the foster parents and the child in their care and retains the overall responsibility for the decisions taken on behalf of the child. With these assurances, the Ministry believes that foster parents will be prepared for and responsive to the challenges of their new role.

The Role of Staff

The consultation paper did not define the role of staff as closely as it did the role of foster parents. It described staff's responsibilities very broadly, alluding to the protection and psychological well-being of the child, the child's relationship with his natural parents, management of child behaviour, provision of support services to the foster parents and coordination and organization of community resources. In more general terms, the role of staff in foster care may also be said to be one in which various kinds of intervention are used to help the foster parents make the experience constructive for each child in care. Although the discussion in the paper recognized the demanding character of the staff role, it did not fully recognize its complexity.

Agencies that work with children and their natural families are inevitably called upon to understand very complex situations, relationships and needs. The various reasons why some children cannot remain in their natural families have to be viewed in relation to the varying capacities and desires of parents and the needs of their children. For example, children born with severe developmental problems may by their extreme dependency test severely the parenting capacity and motivation of even very strong parents. On the other hand, the limited parenting capacity of some adults, coupled with other emotional and environmental problems, may result in their rejection of even relatively normal children. A combination of a number of such factors may prompt some parents to become abusive to their children, others to seek professional help from community agencies and still others to request removal of their children. Workers are required to make a very thorough and sensitive assessment to understand the family relationships and their impact on the children as well as the specific needs of each child. In some instances, where children appear to be at risk, the children may have to be removed before there is time to complete such an assessment.

Foster children are known to have special needs associated with immediate confusion and pain related to separation from their families, with long-standing dysfunction within their natural families, with innate developmental delays or with a combination of these and other factors. The emotional environment in the foster family, and in particular, in the children's relationship with their foster parents will be the primary context in which the children will be helped with their special needs or problems. Staff must know the children and their needs well to develop, in concert with the foster parents, a clear focus on facilitating their growth.

A critical aspect of the role of staff is working with foster parents to help them develop and maintain relationships through which they will be able to respond to the needs of their foster children. The early phases of a placement are not likely to be easy for the children or the foster parents.

The child may have come to distrust all adults and may demonstrate this through difficult behaviour that is his way of testing his new foster parents. Another child, on the other hand, may be very quiet, pleasing and appreciative as he begins his stay in a foster family and appear to "relate easily" to his foster parents but display more assertive, difficult behaviour as he relaxes his defences. Thus staff must be alert not only at the start of the placement but also during later phases both to prevent "placement disruption" and to ensure that the foster family and the child are able to communicate in such a way that the child has a constructive growth experience while he remains in the family.

Staff must therefore be able to identify the need for and provide various kinds of help to the foster parents and child. If the foster parents are inexperienced, they may require support from the staff person in the sense of reassurance that the child's difficult behaviour is not his response to them but rather his way of handling such emotions as fear, anxiety or mistrust. Sometimes experienced foster parents may find themselves unable to accept testing behaviour with this kind of worker support as they did in the past and thus may need to understand why their own behaviour with the child is different this time. The child may also require some assistance by the worker and the foster parent to help him consider his feelings and alter his behaviour. In another situation, the worker may decide with the foster parents that the foster parents may require extra relief in order to give more time and attention to the child. Staff also have an obligation and a responsibility to ensure that the foster family's strength and uniqueness as a family unit is maintained. It is because of the provision of an experience in family life that foster care is viewed as the preferred type of residential care when a child for some reason may not remain in his own family.

Staff are also responsible for managing decisions and planning and managing the changes that emanate from those decisions. At each point in the process, decisions are taken that affect the lives of the children who come into care as well as the lives of their natural families and the families of the primary caregivers. As these decision points are predictable and expected, the decisions can be managed in a planned fashion. To ensure that this takes place, good practice requires mechanisms for decision making, review and reporting that specify persons to be held accountable. The worker is responsible for the development, negotiation, implementation, monitoring and review of written plans including placement goals based on an assessment of each foster child and his natural parents. Such plans should be achievable and measurable, and should specify the roles and responsibilities of each participant. For this planning process to be effective, the plans should be confirmed with all who participated so that their obligations are accepted and can be met within the time specified.

As well as managing planned change, the worker must be able to react to unplanned change brought on by situations that may not have been predicted or expected, and ensure that decisions are taken in the child's best interests. In this regard the worker has a keen responsibility to be particularly sensitive to indications of gradual changes that may grow into major developments, since these can require radical adaptations in the plans for the child.

Natural Parent Involvement

The approach taken to involvement of the foster child with his natural parents (2) in the consultation paper reflected recognition of the risks involved in the separation of a child from his natural parents and in his placement in foster care. As the paper noted, many children placed in care become permanently separated from their natural parents and are often moved from one foster home to another. Because of their separation from their natural parents and family and the disruption in their social and emotional relationships, they may suffer psychological and emotional disturbance.

The consultation paper further noted that natural parents until recent years had not been encouraged to be involved with their children in care. The placing agency's desire to allow a child to adjust to a substitute family often resulted in agency workers discouraging contact between the foster child and his natural parents. Also, a visit from the natural parents was seen as disruptive to the foster home and upsetting to the child. As a result, personal contact between natural parents and their children in care often would not occur, leading in many cases to permanent foster care for the child.

The consultation paper acknowledged the difficulty of attempting to maintain or develop a positive relationship between a foster child and his natural parents when the child must be protected from harmful circumstances. It recognized involvement of the natural parents with the child in foster care as a potentially contentious issue for foster parents. It also recognized that parental involvement may be restricted, and may not always be possible: it may be prevented by court order or not required because of placement under particular legislation.

Response during consultation to natural parent involvement in principle was generally favourable and a number of agencies stated that it was their practice to involve natural parents in planning for their child in care. Some respondents raised concerns and objections, however.

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2. The term "natural parents" refers to "the natural parent(s) or guardian with whom the child normally resides". It appears in the standards with the following condition, "provided that they are available, and that their involvement is not prohibited by court order". These conditional clauses are not always included, but they are implied each time the term natural parents appears.

Some submissions suggested that more attention should have been paid to parents' responsibilities towards the child. "The philosophy does not address the need for change in parents' behaviours", commented one agency, asking, "What are the expectations of them?" Another criticized the paper for "not placing enough emphasis on the work for the natural family to undertake".

Undeniably, working with the natural parents of a child in an involuntary foster care situation is one of the most difficult aspects of foster care service. Nevertheless, as the consultation paper stated, research has shown the importance of contact of the foster child with his natural parents for the child's emotional well-being and his prospects of returning home. Further, inclusion of the natural parents in the decision-making process for their child in care and disclosure to them of information regarding the child recognize their importance to the child. Also, participation by the natural parents in decision making for and contact with the child provide opportunities for them to demonstrate their commitment to resuming the care of the child, their responsibility and their capacity to be a parent. Using this approach to the parents is also good child care practice.

It therefore remains the view of the Ministry that an effort must be made through the plan of care to provide for the continued involvement of the child with his natural parents, except where this is prohibited by court order. Thus the final standards require that the plan of care specify the methods for developing and/or maintaining the relationship between the child and his natural parents. To reflect the reality that the natural parents may not always agree with the plan, the agency will be required only to seek their agreement to it.

The proposals for natural parent involvement that drew the most emotional response were those concerning contact by natural parents with the foster child and by implication with foster parents as well. The commentary on these proposals suggested that visits could take place in several ways, including the natural parents visiting with the child at the placing agency under the supervision of a worker, at the foster home or in the natural parents' own home. The proposed standards did not require natural parent visits in the foster home. A number of responses from both agencies and foster parents, however, apparently assumed that this would be expected in all situations and cited the understandable reluctance of foster parents to become involved with difficult natural families. One agency objected that "Asking foster parents to support visits is one thing, forcing foster parents to be involved in visits is another which could result in an agency recruitment and retention problem."

It appears that the consultation paper did not place sufficient emphasis on the preparation and support the agency must provide to help foster parents in their contacts with natural parents. Some respondents pointed to the needs of foster parents for an informed understanding of the clinical need for planned and consistent contact between foster children and their natural families. One agency noted that the expectation of natural family involvement could be incorporated in recruitment, orientation and training sessions for new foster parents. This expectation was in fact contained in guidelines for orientation and training but could have been made more explicit in the related commentaries. Other comments suggested that foster parents need to be in agreement with a specific level of natural family involvement with the child placed in their care.

Concentration during recruitment and orientation of foster parents on the question of natural parent involvement with the child in care will increase foster parents' understanding of its importance and thus their desire to help make it possible. Training will help increase their capacity to deal with this difficult aspect of fostering. It is expected that arrangements with the foster parents concerning natural parent involvement will be covered by the general foster care service agreement between the agency and the foster parents and by the foster care plan with respect to a specific child. These agreements will give foster parents the opportunity to agree to the type and the level of involvement.

Some responses advocated greater agency discretion in the question of natural parents' involvement in planning for and contact with the child in care, arguing that professional judgement is required in this area. It was suggested also that the proposals for consultation with both natural parents and foster parents would dilute the responsibility of a Children's Aid Society in its role of guardian of the child. On the other hand, one submission called for greater clarity about the types and levels of involvement to be carried out. The final standards specify an effort to maintain or develop at least a minimum degree of involvement of the natural parents with the child where this is indicated but allow agency discretion and professional judgement as to how it will be achieved. In the view of the Ministry, this is a desirable balance.

There was a suggestion during consultation that recognition be given to the agency's "right" to make decisions that may restrict the natural parents. As previously noted in the consultation paper and in this paper, restriction of natural parent involvement is essentially an issue for the courts. If an agency currently providing foster care to a child either as a ward or in a voluntary situation reaches the clinical judgement that further parental access to the child should be denied or limited, the agency should take the matter to court.

Some agencies were concerned that there was not enough staff time available for natural parent involvement to the extent implied by the paper. Orientation and training of agency workers should help them work more confidently and therefore more effectively to bring child and natural parents together to resolve their difficulties. The Ministry hopes that agencies will make investment of agency staff time in this highly worthwhile area a priority.

Some respondents expressed disappointment that the consultation paper did not explicitly discuss the importance of the child maintaining contact with siblings or his extended family. It should be noted that the proposed standard with respect to natural parent visiting specifically mentioned the natural family. It was and is the Ministry's intention to encourage continuing involvement of the child with his siblings and his extended family as well. The relationships of the child with brother, sister, grandparents and other family members are also important to his sense of identity as a family member. They may be particularly important if the child's parents are not available for regular or frequent contact.

Foster Care for Native Children

This is a time of transition in child welfare services for Native people. In recent years, Native groups have voiced strong objections to services to children and families that do not reflect Native cultural values or social norms, and have been actively seeking to replace them with Native-run services.

In response, the Ministry has committed itself to the transfer of responsibility for Native-designed child and family services. This development began in 1979 with pilot projects that had as a major goal the reduction of the high number of Native children being removed from their home communities and being placed in non-Native foster and adoption homes. The success of these pilot projects led to the development of similar projects in 30 Indian communities in Ontario.

More recently, the development of Native child and family services in non-reserve communities has been the focus of discussions between provincial Native organizations and the Ministry. The Child and Family Services Act allows for the development of a range of Native-designed and managed services.

Consultation on the foster care proposals with Native groups confirmed the desire of Native people for control of foster care for Native children. The question of specific standards of practice in foster care as they relate to Native children cannot be addressed outside of the larger context of the development of Native-designed and managed child and family services. Thus, while Native-run foster care services are under development, the final foster care standards set out in this paper will apply to agencies generally, including those currently providing foster care for Native children. The Ministry does not believe that it is appropriate to anticipate the direction that will be taken by Native people in the development of standards of practice within Native child and family services. Through its area offices, the Ministry will support the development of both Native child and family services and Native foster care within those services. While Native-run foster care services are under development, the final foster care standards in this paper will apply to all agencies licensed to provide foster care for children. Native groups will be encouraged to participate in current child welfare processes as a basis for determining those elements that are relevant to Native communities and for developing new standards that respond more effectively to Native needs. Moreover, band councils will be eligible to apply to be licensed to provide foster care under the standards that will apply initially to all foster care services. The final standards include a number of provisions that are consistent with Native principles of service delivery. The requirements relating to kinship ties as criteria for placement selection and involvement of the child in care with his natural family are consistent with Native concepts of good practice.

Privacy and Confidentiality of Information

In recent years, the need to find ways of protecting the privacy of people receiving service while ensuring agencies access to information essential for service delivery has been the focus of much concern. It has gained in urgency with the spread of new technology that facilitates both the collection of and access to large quantities of data. This concern has been reflected by the Ministry in consultation papers such as the 1979 report of the Task Force on Case Information Disclosure, in policy statements and in legislation. The response to the proposed standards for information sharing in foster care showed wide sensitivity to the need for protection of personal privacy.

The major concerns about privacy and confidentiality in foster care service centred on access by foster parents to information about the children placed in their care and about themselves. Questions were raised as well about security of information, means of access to it and methods of information sharing.

The consultation paper said that foster parents are "entitled" to know as much about the history, behaviour and needs of the foster child placed in their home as the placing agency does, if the care provided is to be appropriate for the child. It proposed that a foster family be recommended to care for a child only after "full disclosure" of information on the child and agreement to the placement on this basis.

While there was general support in principle for disclosure to foster parents of information about the children placed in their care, some respondents would limit the information to be made available. Natural parents' privacy caused particular concern. It was suggested, for example, that access by foster parents to information on foster children be qualified in some way, such as:

- "all relevant information" rather than "full disclosure"
- information "relevant" to the care of the child
- "full disclosure of information pertaining to the child only".

In this connection, it was noted that discretionary disclosure by the agency would require understanding and judgement on the part of the responsible worker.

The policy position taken in the final standards, as in the proposals, is that the collegial role of foster parents requires that they be given access to the information they require to provide care that meets the needs of the children placed in their homes. The concern about the privacy of the child's natural family is a valid one, however. The final standard has been reworded, therefore, to require disclosure of "all information relevant to the care of the child".

Another final standard, which deals with information to be provided foster parents at the time of placement, requires that health and medical information necessary for the care of the child be provided in writing, while other information is to be given orally. These provisions attempt to meet some of the concerns raised by foster parents about maintaining the security of sensitive information about their foster children.

The primary concern arising from the proposal that foster parents have access to all agency-held information about themselves was that references may be given in confidence. Again, this is a reasonable concern. The final standard dealing with foster parents' access to their own files permits references and other information given to the operator in confidence to be kept separate and confidential. All other agency-held information about the foster parents, including the operator's evaluation of the home is to be made available to the foster parents on request.

The information-sharing requirements in the standards suggest a need for agencies to review their practices to ensure that information recorded is relevant, accurate and up to date, that appropriate information is shared and that information is shared in an appropriate way.

Discipline

The proposed standards concerning acceptable and unacceptable methods of discipline stimulated extensive debate. The contributors to this debate clearly share the Ministry's conviction about the central importance of discipline in family life and child development. They expressed varying degrees of support for and disagreement with specific proposals. The proposed ban on corporal punishment evoked more emotional response than any other proposal in the consultation paper. The discussion that follows reviews the comments on the proposed standards and presents the Ministry's response and final position. The child and family services legislation introduced after the consultation process ended specifically forbids any service provider or foster parent to inflict corporal punishment or permit corporal punishment to be inflicted on a child in the course of the provision of a service to the child.

The Concept of Discipline

Discipline was defined in the consultation paper as the act of maintaining order in a family. On reviewing the original discussion and the response, it appears that it might have been more helpful to define discipline as the act of establishing rules of conduct that will serve as a model for the behaviour of the children in a family and help them learn to control their own behaviour. As described in the paper, the exercise of discipline is a process whereby parents impart their own standards and values, establish rules and set expectations for and limits on the behaviour of their children according to each child's age, personality and capacity to learn. As a result, children learn that their behaviour has consequences and learn to control their behaviour. Parents' understanding of how to manage and change the children's behaviour to help them conform to family rules is essential to this learning process. A child's adherence to such rules depends primarily on the relationship between the child and his parents. The discipline that parents establish should be timely, deliberate, fair, consistent, reasonable, logical and appropriate. The parents should convey clearly to the child the connection between behaviour and consequence.

The consultation paper recognized that some children placed in foster homes have developed little self-control and may present serious behavioural and/or emotional problems. It stated that foster parents may need to learn other forms of discipline than those used with their own children. They may need to use different methods of behaviour control with a particular foster child because of his unique situation, his stage of development or his perception of authority.

The paper defined punishment as a consequence that is known, prearranged and imposed because of deliberate misbehaviour on the part of a child. It stated that there are many ways to respond to violations of rules or undesirable behaviour and punishment should only be used after less severe and non-punitive approaches have been tried. A foster child may have experienced many negative and punishing responses to his behaviour in the past.

The discussion of discipline in the consultation paper was relatively brief and in retrospect appears narrow in focus. A crucial point that was neglected in the paper is that the concept of discipline advocated by the

Ministry is a positive one. It should be emphasized that discipline can be achieved through praise, encouragement and through rewards as known consequences of replacing disruptive with desirable behaviour. This is the developmentally sound approach because it builds and supports the child's sense of his own worth and competence.

Also, no mention was made of the role of discipline in the child's plan of care, an omission that is rectified in the final standard dealing with the content of the foster care plan. Further, although the proposed guidelines concerning the foster home study touched on discipline as an aspect of prospective foster parents' approach to parenting, the accompanying discussion did not highlight its importance.

Acceptable Practices

One proposed standard would require the placing agency to develop its own policies setting out both acceptable and unacceptable disciplinary practices for workers and foster parents and to instruct foster parents in the use of acceptable measures. Another proposed standard listed a number of disciplinary practices regarded by the Ministry as unacceptable including corporal punishment and aggressive physical contact. The paper avoided specifying a list of acceptable practices in a standard, noting that it would be possible to establish a range of rewards and punishments, but to do so would imply that anything within the range could be applied to a given child, whereas judgement is required as to the child's needs.

Consultation showed that there was general acceptance of the need to set disciplinary standards and to specify both acceptable and unacceptable practices. However, both foster parents and agencies objected to various provisions in the proposals and called for clarification of some of them. In addition, a number of respondents would have preferred that the Ministry specify acceptable practices in a standard rather than leave this to the discretion of agencies. Several responses urged that the Ministry as well as agencies provide training courses for both staff and foster parents in acceptable methods of discipline.

After reviewing these responses, the Ministry has come to the conclusion that the proposals should be retained with only minor changes. First, it would not be appropriate to regulate acceptable disciplinary measures. As indicated in the consultation paper, to do so would be to imply Ministry approval of use of the specified methods with all children whatever the circumstances. Moreover, to attempt to enforce compliance with acceptable measures would be an impractical use of agency and Ministry resources. The use of acceptable practices is more readily encouraged through education and training. It is, however, important that agencies with their foster parents consider the approach to discipline and the disciplinary practices that are acceptable for use with children in their community. Thus a final standard will require the agency to ensure that its workers and foster parents know what the acceptable practices are.

Unacceptable Practices

The position taken by the Ministry in proposing a ban on corporal punishment in foster care services is consistent with the position it has taken in setting policy for children's services in general. Corporal punishment has been forbidden in Ministry facilities and facilities governed by the Children's Residential Services Act and the Day Nurseries Act. As discussed above, the Child and Family Services Act includes in a statement of rights of children a specific prohibition against the use of corporal punishment by foster parents as well as service providers.

Some agencies that commented on the proposed ban in foster care services had themselves banned corporal punishment and others were reviewing this question. Proponents of a ban welcomed the Ministry's leadership and support. The responses indicated that agencies that supported but had not yet implemented a ban on corporal punishment would not in general face great difficulty in doing so.

Among opponents of a ban, however, the proposal evoked a highly emotional, even angry response. The arguments advanced against a ban on corporal punishment in foster care included:

- A perceived need to use corporal punishment with certain children: Many foster parents argued that corporal punishment may prove to be the only means of dealing with certain children and should therefore be available to them as part of a range of disciplinary options. In particular they cited: (1) very young children who lacking an awareness of danger thrust themselves into hazardous situations, (2) children who because of previous experience are conditioned to corporal punishment and seem unable to respond to any other form of discipline on coming into care and (3) children with developmental handicaps who require the use of corporal punishment as part of a behaviour modification program. Similarly, corporal punishment was seen as necessary in dealing with provocative behaviour. Some placing agencies therefore viewed corporal punishment as a necessary last resort subject to careful restrictions.

- Differential treatment of foster children and natural children: Both foster parents and agencies objected that a ban could result in foster parents treating foster children differently from their own children.

- Lack of trust in foster parents: Some responses noted that foster parents have gone through an approval process and argued that foster parents should therefore be trusted to act with good judgement on behalf of the children in their care.

- Conflict with societal norms or values: It was argued that many people including some foster parents condone corporal punishment as an aid in rearing children. In some communities "spare the rod, spoil the child" is an accepted principle. Also a ban on corporal punishment was seen as being in conflict with the Education Act, which permits its use in schools and with the Criminal Code which permits a person to use "force by way of correction" towards a child in his care, "providing such force is reasonable under the circumstances".

- Potential for emotional abuse: "We most certainly need to be given acceptable disciplinary practices" said one foster parent reporting for his foster parent association. "Because of the 'corporal punishment' being taken away it was felt that there could be a greater risk of 'emotional abuse' or verbal abuse."

Other, more general objections to the proposed standard concerning unacceptable practices included:

- Intrusiveness: Some respondents saw a serious violation of family privacy in the proposals and questioned the extent to which government should intrude into foster family life. Some argued that the matters dealt with in this standard should be worked out between the agency and foster families rather than being legislated.
- Difficulty of monitoring/enforcement: There were concerns that the Ministry and agencies may not be able to monitor and enforce compliance with the proposals: the argument was advanced that foster parents might continue to use unacceptable practices but withhold the fact of their doing so from agency workers.

In view of the various objections to the proposal, some agencies foresaw problems in recruiting and retaining foster parents.

Agencies were also concerned about the consequences of a violation of the proposed standard. They asked whether they would be expected to close any foster home where a violation was known to have occurred.

On reviewing these responses, it appeared that the lack of discussion of reasons for the proposal to extend the ban on corporal punishment to foster care contributed to the difficulty of a number of readers in understanding why the Ministry was taking this position. After thorough consideration of the arguments advanced on behalf of corporal punishment, the Ministry has concluded that none of the arguments cited is sufficient to justify a policy that would permit use of corporal punishment with a child in care. The ban on corporal punishment will be extended to foster care services. The reasons for the Ministry's opposition to corporal punishment in all residential services are the following:

- Right of the child in care to freedom from corporal punishment: The Child and Family Services Act includes a statement on "the right to freedom from corporal punishment" for children in care. The Ministry believes that all children have a fundamental right to the safety and security of their person and a corresponding right to the same protection as is enjoyed by adult members of the community. While acknowledging that it is the right and indeed the responsibility of the parent or foster parent to control their child, all such rights are subordinate to the well being of that child.

- Respect for the human worth of the child: To use reason rather than force with a child is to show the child respect for his human worth and to demonstrate the belief that he is capable of reasonable, socially acceptable behaviour.

- The "extra duty of care" owed by the state to the child in care: As noted in the statement of rights for children in foster care in the consultation paper, children for the most part must depend on adults for their protection and well-being. The child in care is particularly vulnerable as caregivers may not be fully aware of the past experiences of a child who is not their biological child. There is a need therefore to provide some additional protections for children who have been removed from the care of their families, whether voluntarily or through state intervention. Children in foster care are in effect held in trust by the state. The state must meet an "extra duty of care" to ensure that the basic human rights of the child are upheld when the child is not protected by the safeguards of his natural parents and family.

- The need to break an existing pattern of violence: One of the ways children learn is by example. Physical punishment has the potential for teaching a child that violence is an acceptable method of solving problems. Corporal punishment also carries with it the additional risk of excess. To use reason rather than force is to provide a constructive model for the child's behaviour and to show him that violent behaviour is not acceptable. It is essential if continuation of a family pattern of physical violence from one generation to the next is to be prevented.

Although a number of respondents objected to the proposed ban of corporal punishment in the consultation paper, there was strong support for the general direction away from its use and widespread belief that corporal punishment is neither necessary nor is it an effective way of helping children modify their behaviour. The Ministry believes that the trend in community standards is moving towards reduction, restraint and in some sectors the elimination of the use of corporal punishment. In addition there is strong belief among several of the respondents in the expertise of child welfare agencies and service and care providers to expand alternatives and provide a range of more positive interventions to modify or effect change in children's behaviour.

The Ministry recognizes that opponents of a ban on corporal punishment may have difficulty in accepting that the arguments against its use in residential facilities apply equally to care provided in private homes. Some foster parents may feel that methods of discipline used in their own upbringing are being questioned and found wanting. They may feel that, by implication, their fitness as parents is being questioned. The Ministry believes, however, that foster parents as highly motivated, conscientious caregivers, when given a clear understanding of the reasons for its position, will respond to the challenge of adapting their ways of child rearing to incorporate new disciplinary methods. Moreover, given training and support in the use of a range of methods of discipline that will reduce disruptive behaviours and encourage socially acceptable behaviours, foster parents should feel less need and desire for corporal punishment as an option of last resort.

For some and perhaps for many foster parents, the transition to new methods of discipline will not be easy and this must be recognized in the implementation of the prohibition against corporal punishment. Where a violation occurs, the agency will be expected to consider the degree of any physical or emotional harm caused the child by the use of corporal punishment, the intent behind its use, whether its use was an isolated incident and the level of provocation in deciding whether to remove the child from and/or retain the foster home as part of its foster care services. While agencies must be prepared to account to the Ministry for this exercise of professional judgement, the Ministry in enforcing this standard will give consideration to the situations where physical restraint might be used to prevent children from causing harm to themselves or others.

3. IMPLEMENTATION OF THE FOSTER CARE POLICY

Consultation on the proposed standards and guidelines revealed a number of practical issues that required resolution before the new foster care policy directions could be implemented. These issues are discussed below. A discussion of the approach being taken to implementation of the final standards follows.

Issues in Implementation

Issues that consultation revealed would require resolution included:

- the distinction between a placing agency and an operator of foster homes
- management of foster homes
- numbers of children placed in foster homes
- long-term foster care
- housing requirements
- the volume of paperwork resulting from the proposals.

The Distinction Between Placing Agency and Operator

The consultation paper was directed towards agencies placing children in care. The standards were directed towards the practice of agencies that assessed the child's needs, considered the desirability of the separation of the child from his family and, if required, determined the kind of residential care that was appropriate to the child's needs. The response from the consultation, while in support of the standards themselves, suggested that the standards were too narrowly applied in being addressed only to children entering foster care when they appeared relevant to children entering all forms of residential care.

On the other hand, some agencies reported that they operated foster homes but did not always carry out the standards for children entering care. Private operators generally and some Probation and Aftercare Officers, for example, questioned the applicability of some of the standards to them and in some cases the workability of the standards. As well, Children's Aid Societies pointed out that some children in their foster homes are admitted to care and placed in their care by a Children's Aid Society in another part of the province.

The standards in the consultation paper also outlined the practices and procedures placing agencies must provide for foster parents from the initial recruitment through the evaluation of foster homes. Placing agencies were identified as responsible for supporting and assisting foster parents and for ensuring their acceptance and involvement as part of the service delivery system.

The response from the consultation generally supported these standards. However, placing agencies that operated foster homes described structural and organizational difficulties in attempting to separate the functions and practices for children and natural families from those for foster families.

To address these issues, the final standards have been drafted to make a distinction between the practices and responsibilities of the placing agencies and those of operators of foster homes. Making this distinction will allow for a wider application of the standards relating to the processes of placing children in care and discharging them from care to agencies with these broad placing responsibilities. At the same time, it will allow for a clearer statement of expectations for agencies that are exclusively responsible for selection, support and supervision of foster homes and for helping children while in those homes.

In the current social service system both placing agencies and operators of foster homes include a wide range of organizations serving children with different needs. Some organizations, such as Children's Aid Societies are both placing agencies and operators of foster homes. Placing agencies include, for example, Children's Aid Societies and Probation and Aftercare Offices. Operators include private corporations, Children's Aid Societies, Probation and Aftercare Offices, Children's Mental Health Centres and Associations for the Mentally Retarded.

The standards that will apply to placing agencies involve the entry of a child into care and his discharge from care. The placing agency has the responsibility for determining the course of service for the child. The placing agency makes the decision that the child requires out-of-home care and specifically foster care, provides an assessment that in part substantiates that decision and prepares the general plan of care for the child. The placing agency also has the responsibility for reviewing the child's placement regularly to ensure that it continues to meet his needs and for preparing plans for transfer or discharge and aftercare as appropriate. The standards that cover these responsibilities are the placing agency standards.

The standards that will apply to operators are those specific responsibilities for the development, supervision and management of foster homes, including:

- selection of foster parents who can accept and help the children requiring placement
- grouping of foster parents approved for placement so that their desires and concerns for foster children are met and the needs of the foster children can be met by foster parents
- support and training of foster parents including the provision of relief, training in child management, development and professional consultation to help ensure the needs of the child are met
- supervision of foster parents in helping foster children while the children are in their home.

The operator and the placing agency must work together closely and co-operatively. While the placing agency must fulfill the placing agency standards, the operator must fulfill the standards that are specific to foster homes. The operator bears the responsibility of selecting and maintaining foster parents and of helping the child while the child is in the foster home.

The structure and/or the organization an agency uses to deliver services is not set out or prescribed in the standards. However, the expectations for the separate placement and foster care processes and for fulfillment of the related responsibilities are clear.

In an organization such as a Children's Aid Society, where different workers rather than separate agencies carry out the responsibilities for children entering care and for children in foster care, the structure used to deliver the services will continue to be a matter of internal policy.

Management of Foster Homes

The proposed standards were intended to establish a comprehensive framework for the operation and management of foster care services. Conceived as a central part of the management framework, the proposed continuum of care encompassed "regular" foster care for children who can readily adapt to a foster family's routine, "supplementary" foster care for developmentally and physically handicapped children and "special" foster care for disturbed children. The response to the continuum proposals indicated support for the concept of classifying, developing and managing foster homes as resources for children with particular needs. Some agencies had either this system or a variant of this system in place, and others have moved to implement such a system. However, a number of agencies have already developed other systems for the classification and utilization of foster homes which they believe are better suited to the needs of the children they serve and to local resource requirements. Consequently, the Ministry will not be imposing a continuum of types of foster care but will instead require each operator of foster care service to develop its own system for the classification of its foster home resources.

In addition to a classification system, the key management standards require the operator to keep a current roster of approved foster homes, to negotiate service agreements with foster parents and to provide ongoing supervision of the homes. The operator in managing its foster homes will plan for variations in its resource requirements within the classification system according to the changing needs of the children served. The operator will also have direct responsibility for the operation of the foster care process, participating in the child's foster care plan and the selection of the foster home placement, and providing supervision and support to the foster parents to ensure the safety of the child and implementation of the objectives in the plan.

Numbers of Children

The consultation paper stated the Ministry's position that the number of children in a parent-model foster home will be four or fewer. Controversy arose during the consultation over the issue of sibling groups and over the suggested further limitations on the number of children placed in a home where the children are handicapped or disturbed.

It was pointed out that counting a sibling group as one child as proposed could result in many more than four children being placed in a foster home. Consequently, the Ministry has set the maximum number at four and eliminated the clause allowing sibling groups to count as one. To allow for sibling groups larger than four to be placed together when appropriate, a clause has been added that the operator may seek the approval of the Director to exceed the limit of four children where all of the foster children are of common parentage or related to the foster parents.

The proposed standard setting the number of children in a foster home also limited the number of children under the age of two years in a home to two. This standard will remain. The amount of care and attention required by a child under two necessitates setting the limit. However, the same exception for sibling groups applies to children under two.

The proposed standard limiting the placement of children in a special foster home to two has been withdrawn. The expectation that operators will establish their own system of classification and utilization of homes leaves it to the judgement of the operator to set appropriate limits depending upon the needs of the children placed.

Long-Term Foster Care

The question of the appropriateness of the proposed standards for long-term foster care was raised during the consultation. Some respondents took the position that children who were established in a foster family in long-term care did not require the same degree of placing agency and/or operator contact and supervision as children admitted for shorter term placements.

The Ministry has considered this issue carefully and has taken the final policy position that the minimum requirements should remain the same. The basis for this position is the knowledge that the needs of children and the needs of foster families change over time. Without ongoing contact, there is a risk that unresolved problems may persist or family circumstances may change without the agency's or operator's awareness and support, and the child or foster family may not seek help until the circumstances cannot be resolved and the relationships are so damaged that the placement breaks down.

The final standards dealing with the frequency of contact permit the agency or operator to alter or adjust the manner in which they provide services to the child and foster family as needed. This flexibility should allow the agency or operator to interact with the child and foster family in the manner most supportive to them.

Housing Requirements

During the consultation, concerns were frequently raised in rural and northern areas that the proposed standards for foster parents' housing were unduly restrictive for many communities. The final standards have been revised to take account of these concerns and to simplify as well the worker's task in approving prospective foster homes. Most of the housing requirements have been grouped in one standard requiring the worker to determine that the home is suitable for placement of a foster child. The worker is required to determine that the home:

- has specifically designated spaces for informal living, dining, food preparation and storage and separate rooms for sleeping and bathing
- has a heating source
- is maintained in a sanitary condition and wastes are disposed of in a manner that does not constitute a health hazard.

In addition the sleeping accommodation standard has been revised to apply to the foster family's "regular" accommodation allowing for tents, trailers and other alternatives to its usual housing when the family is away from home. Provision has been made as well for exemption of foster homes from the housing requirements where these differ from community norms and where requiring compliance with the standards would exclude otherwise suitable homes from foster care service. Operators may apply to the Ministry for exemption from specific housing provisions on behalf of specific foster homes or of categories of foster homes.

The Volume of Paperwork

A major concern reported during consultation was the volume of paperwork proposed in the standards. Some documentation requirements were seen as over-regulatory and unnecessary while others were seen as impractical. The Ministry in attempting to address these problems has first of all reduced the volume of paperwork and in some cases has changed the requirement from a report to an entry on the record as appropriate.

It has been difficult to arrive at an appropriate level of documentation that will result in an accurate, up-to-date record of a child's stay in foster care. The Ministry has taken the position that quality foster care requires attention to recording. Reporting and recording of foster care for a client should be improved just as the level of service delivery in foster care generally should be raised.

Concern was also raised about the number of policies and procedures for foster care service delivery that were required by the proposed standards. It was felt that worker time should be spent on actual service delivery rather than on developing statements of policy and procedures. The Ministry continues to believe that an agency or operator must cleraly state its position to its workers, foster parents and clients. It is reasonable to expect that the obligation to develop these statements will be met by a board of directors or the operator where no board exists, including the input of staff as appropriate.

The Approach to Implementation

Deciding on the approach to be taken to implementation of the final standards required consideration of:

- means of ensuring compliance with the standards
- the timing of implementation
- the Ministry supports required by agencies and operators.

Each of these considerations is discussed below.

Means of Ensuring Compliance with standards

Experience in the development and implementation of standards has made clear that an excess of regulation limits flexibility and inhibits the exercise of professional judgement in the delivery of service. The Ministry has therefore sought the least intrusive, least regulatory approach to implementation of the foster care standards that will ensure the appropriate placement of children, the provision of quality, supervised care and well managed service.

The final standards set out in the policy paper are the standards that the Ministry believes essential to ensuring this level of service. Two approaches will be used to give effect to the standards. A limited number of standards will be written into regulation. These standards cover points of control in the operation of foster care services. Final standards that do not become regulation will be mandatory terms and conditions. These standards cover "good practice", policy making requirements and day to day management of an agency.

The Child and Family Services Act provides for all operators of foster homes to be licensed; an operator is a person who controls or manages foster homes where care is provided to three or more children at more than one location. Operators of foster homes will be licensed on the basis of compliance with minimum standards for foster care contained in the new regulations. The standards included in the mandatory terms and conditions will be attached to all operator's licences.

The Ministry will be seeking assurance of compliance with basic regulations in the following areas:

- Classification and management of foster homes: Each operator must have a system for classification of its foster homes. Each operator must keep a complete, up-to-date roster of approved homes and of placements of children in the homes.
- Support services for foster parents: Each operator must fulfill an agreement for service with every foster parent in its service. In addition to reimbursement, the agreement will cover training, supervision and relief as well as professional consultation as required for the care of children.
- Planning and implementation of service for the child: Each operator accepting children for foster care placement must have a written policy specifying the criteria for selection of a suitable placement for any child. Each operator providing foster care must participate

in the development of a foster care plan for each child placed in a foster home covering the duration of the child's stay in the home, and with the child and the foster parents review the implementation of the plan regularly and routinely.

o Supervision: Each operator must supervise its foster homes, and make regular, routine visits to the homes.

The terms and conditions that will be attached to every operator's licence will be negotiated between the Board of Directors of an agency or operator and the Ministry's program supervisor. Because these standards describe "good practices" and procedures and policy-making requirements to do with the day to day management of the agency, the program supervisor will determine with the Board of Directors of the agency or the operator how compliance is to be achieved.

Authority and responsibility for licensing under the Child and Family Services Act have been delegated to the regional and area offices of the Ministry. Monitoring of compliance with the foster care regulations and the terms and conditions will be carried out by Ministry program supervisors. In conducting a review of an operator's foster care service, the program supervisor will document any deviations from the regulations, negotiate how complaince is to be achieved with the terms and conditions, share the general findings with the operator and make recommendations regarding a licence to the Regional Director or Area Manager. A licence will normally be issued for one year.

If there are valid and acceptable reasons that would prevent an agency from complying with a standard in the regulations, an exemption from compliance may be considered. The Ministry will provide a procedure for reviewing and approving requests for exemptions.

All of the final standards will be included in the Ministry foster care manual which will provide definitions of terms used in the standards, specify the intent of each standard and show how compliance with the standards can be achieved.

The Timing of Implementation

The Child and Family Services Act will be proclaimed in July 1985 and the new licensing requirements and procedures will become effective at that time. An existing licence issued under the Children's Residential Services Act will remain valid until the expiry date. Operators that hold licences under the Children's Residential Services Act will be expected to comply with the new regulations on the anniversary of the issuance of their existing licence.

Operators that are not currently licensed will be expected to apply to their area office for a licence under the new legislation. A review of an operator's compliance with the regulations will be undertaken and a recommendation will be made regarding licensing.

Ministry Supports for Agencies and Operators

It is not possible to determine the exact cost of implementing the standards. Because most of the standards are believed to be in place in agencies, formal implementation should involve no major cost. However, practices of agencies vary and some agencies are not now in compliance with the standards.

The Ministry will assist agencies and operators whose practices do not comply with the standards to achieve compliance with these standards. Training supports and other assistance will be provided where the Area Office so recommends.

If an agency or an operator requires assistance in implementing the standards, this should be planned and presented in the agency's or the operator's service plan. Service changes or changes in funding should be negotiated with the Ministry by the agency/operator and the Area Office through the service plan.

4. HOW TO READ THE DETAILED COMMENTARIES AND REVISIONS

The chapters that follow present in detail the Ministry's response to the comments received on specific proposals during consultation and the revisions subsequently made in the final standards.

General Organization

The topics covered appear in the same sequence as the consultation paper. Chapter 5 discusses rights in foster care services. Chapters 6 through 8 present commentaries on the revisions made in the proposed standards for:

- foster care practices: the child and natural family
- foster care practices: the foster home
- management of foster care service.

To assist the reader, the original foster care proposals are reproduced in full within these chapters with the indented notation:

Proposed Standard

and, as in the consultation paper, are set off by grey shading.

Each proposed standard is followed by a commentary summarizing the response during consultation and the resulting decisions taken by the Ministry, then by the standard or standards in final form.

The final foster care standards are bordered in black where they appear in these chapters and introduced by the indented notation:

Final Standard

The standards that are being treated as broader placing agency standards are introduced by the indented notation:

PLACING AGENCY STANDARD

The system of topic headings and the numbering system used in the consultation paper to facilitate cross-referencing have been retained. It has been necessary, however, to renumber many of the standards. Some standards have been added. In addition, some standards topics have been retitled. Where such changes have been made, the commentaries specify the new numbers and/or new titles of the final standards.

Changes in Wording

Significant changes in phrasing are explained in the commentaries. Minor grammatical and punctuation changes are not discussed in connection with individual standards.

Cross-Referencing

A cross-reference from one standard to another is made by number. For example: (SEE: FPS-01.1).

A Glossary of Terms

Program-related terms and others that are used in a specific sense in this paper or may be unfamiliar to persons not involved in foster care services are defined in a glossary presented in Appendix B.

Requirements for Documentation

A summary of all documentation required by the final standards appears in Appendix C.

The Foster Care Standards

To make it possible to read the final foster care standards as a body, Appendix D contains the complete set.

The Placing Agency Standards

The complete set of placing agency standards is contained in Appendix E.

5. THE PHILOSOPHICAL BASIS FOR THE STANDARDS

The consultation paper contained a chapter that presented the philosophical framework within which the proposed standards and guidelines for foster care were developed. The discussion in that chapter viewed the foster care process from several perspectives, those of the foster child, the foster parents and the worker in the placing agency. It argued that an understanding of the respective rights and responsibilities of each of the participants is necessary for an appreciation of the impact of fostering on the people involved and for the enhancement of foster care.

The sections that follow:

- summarize the response to the proposed statements of rights for the participants in the foster care process
- review the Ministry's position on the rights of children in care
- indicate the ways in which the final standards will implement the rights of children in foster care.

The Response to the Proposals

The philosophical framework presented in the consultation paper received general endorsement. For the most part, the specific rights proposed also received approval.

Respondents generally welcomed the recognition given in the proposed rights statements to the importance of the role of the foster parents and the needs of both foster parents and workers for training, supervision and support. There were suggestions, however, that the responsibilities of the various parties should have been more fully articulated. There were also some objections that the paper did not include a discussion of the rights and responsibilities of the natural parents of the child in foster care. There were concerns as well that stating the rights of the child and the foster parents could, as one agency put it, "expose agencies to legal suits by children or foster parents on the basis of their perceived denial of specific rights". Several respondents commented that in any conflict between the rights of the different parties, it is the interests of the child that should prevail.

The Ministry's Position

On considering the response to the rights proposals, the Ministry has come to the conclusion that it is preferable in a paper on standards for foster care to focus on the child in care, who is the central concern in writing the standards. The interests of the child should be given primacy. Unlike adults, the child is unable to assume full responsibility for his own well-being and in normal circumstances is dependent, vulnerable and in need of protection. If the child is separated from his natural family and placed in care, he is in need of special protection as the consultation paper indicated. Thus the discussion of rights in this paper will focus on the rights of the child in foster care.

The new Child and Family Services Act begins with a declaration of general principles of service that apply to foster care in particular:

- "The purposes of this Act are, as a paramount objective, to ensure the best interests, protection and well-being of children."
- "...Help should give support to the autonomy and integrity of the family unit and be provided on a wherever possible basis of mutual consent."
- "...The least restrictive or disruptive course of action that is available and is appropriate in a particular case to help a child or family should be followed."
- "...Children's services should be provided in a manner that respects children's needs for continuity of care and for stable family relationships and takes into account physical and mental developmental differences among children."
- "...Wherever possible, services to children and their families should be provided in a manner that recognizes cultural, religious and regional differences."
- "...Indian and Native people should be entitled to provide, wherever possible, their own child and family services and ...all services to Indian and native children and families should be provided in a manner that recognizes their culture, heritage and traditions and the concept of the extended family."
- "Service providers shall, where appropriate, make services to children and their families available in the French language.
- "Service Providers shall ensure
  - "that children and their parents have an opportunity where appropriate to be heard and represented when decisions affecting their interests are made and to be heard when they have concerns about the services they are receiving and
  - "that decisions affecting the interests and rights of children and their parents are made according to clear, consistent criteria and are subject to procedural safeguards."

The legislation also includes a statement of rights of children in care that applies to children in foster care. These rights are consistent with the rights stated in the consultation paper. Under the new Act, the rights of each child in care include:

1. communication
2. personal liberties
3. a plan of care
4. food
5. clothing
6. medical and dental care
7. an education
8. recreational and athletic activities
9. participation in decision making
10. information concerning the child's rights and responsibilities.

Implementing the Rights of Children in Foster Care

The implementation in practice of each of these rights as it applies to children in foster care is discussed below. The discussion that follows explains how legislated rights under the Child and Family Services Act are supplemented by the foster care standards.

1. Communication.

The Child and Family Services Act states concerning rights of communication that a child in care has a right to:

- speak in private with, visit and receive visits from members of his family regularly (3)
- speak in private with and receive visits from his solicitor, another person representing the child, the provincial Ombudsman and members of his staff, and a member of the Ontario legislature or the Parliament of Canada
- send and receive mail, subject to certain restrictions.

Mail to a child in care may be opened by the service provider in the child's presence and inspected for prohibited articles. It may be read if there are reasonable grounds to believe that it may cause the child physical or emotional harm, but it may not be examined or read if it is from the child's solicitor and it may not be censored or withheld from the child, except that articles prohibited by the service provider may be removed from the mail and withheld from the child.

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(3) A child in care who is a Crown ward or a Children's Aid Society ward is only entitled to speak with, visit or receive visits from a member of his family under an order for access made under the child protection section of the Act.

Final standard FPS-14.1 touches on these rights of communication. It requires the operator to have a written policy regarding the foster child's privacy in receiving and sending mail and in receiving and making telephone calls and to advise workers and foster parents of the policy. The operator will be expected to reflect the child's rights of communication under the Child and Family Services Act and to interpret them to workers and foster parents through this policy statement.

2. Personal liberties.

On the personal liberties of the child in care, the Act states that he has a right to:

- have reasonable privacy and possession of his own personal property
- receive the religious instruction and participate in the religious activities of his choice, subject to parental direction where the parent of the child retains a right to direct the child's religious upbringing.

The act also states that no service provider or foster parent may inflict corporal punishment on a child or permit corporal punishment to be inflicted on a child in the course of the provision of a service to the child.

"Reasonable privacy" may be viewed as encompassing both intellectual and physical privacy. The child's rights of private communication under the Act and the implementation of these rights through standard FPS-14.1 are discussed above. A final standard dealing with confidentiality of information, SDMS-21.2, permits the child aged 12 years or older access to information on himself that is held by the operator; it limits other access to information on the child to authorized persons in the employ of the operator, to the child's foster parents when they have signed a statement of confidentiality and to certain other parties with appropriate consent. In addition, the consent of the natural parents or guardian of the child under 16 years of age is required for the transfer of information about the child by placing agency standard PAS-15.1.

The consultation paper indicated that certain proposals were intended to ensure a reasonable degree of privacy of accommodation for the child. Final standard SDMS-03.1 requires a visit to the home of prospective foster parents to determine that it is suitable for placement of a foster child. This broadly stated requirement allows the worker to take privacy into account when determining the suitability of a home for foster care, recognizing that the degree of privacy a child requires will depend on his age and cultural background.

The importance of personal belongings for a child separated from his natural parents and home is noted in this paper as it was in the consultation paper.

The position taken in developing the foster care standards is that the child should be encouraged to take belongings that are important to him to the foster home to help him see it as his home. Restrictions on what the child takes to the foster home should be limited to considerations of safety, health and the size of the item. This approach is reflected in final standard FPS-12.1, which requires an operator of foster homes to have a written policy and procedural guidelines with respect to the purchase and possession of hazardous goods for or by the foster child.

Several of the final standards address corporal punishment in different ways. Standard FPS-15.2 deals with unacceptable disciplinary practices, expressly forbidding corporal punishment as well as aggressive physical contact and deprivation of basic needs such as food, shelter, clothing or bedding. Standard SDMS-17.1 requires a prompt response to every complaint against a foster family concerning the care of their foster child and standard SDMS-17.2 requires specific policies and procedures for the investigation of complaints alleging the use of unacceptable disciplinary practices. These requirements are, of course, in addition to those for the protection of children under the Child and Family Services Act.

The consultation paper stated the Ministry's position that care should be taken to respect both the religious preference of the child and/or his natural family and the practice of the potential foster parents when placing the child. A child who has previously participated in religious observance should be given the opportunity to continue to practise his religion in accordance with his personal preference or the customary practice of his natural family. Careful consideration should be given to the appropriateness of placing a child who is not from a religious background with religiously observant foster parents. In any placement participation by the child in religious observance should be voluntary rather than compulsory.

Final standard FPS-02.1 requires that information on the religious background of the child's family be obtained prior to selection of a foster home for the child. Final standard FPS-02.2 requires disclosure to the prospective foster parents of all information known to the operator about the child that is relevant to the care of the child, and agreement by the foster parents to the placement of the child on the basis of this information. These requirements should ensure that the foster parents are in agreement with the child's and/or the natural family's wishes regarding participation in religious observance by the child.

It should be noted that consultation on this point revealed that some foster parents believe strongly in involving the foster children in their care in their own religious observance, holding that to do so helps the children feel accepted in and a part of the foster family. The foster family's religious practice must not supersede the preference of the child and/or his natural family. Airing religious concerns while placement with a particular foster family is under consideration will give the foster parents the opportunity to decline a placement that would not be in accord with their own religious practice.

3. A plan of care.

The Act states that a child in care has a right to a plan of care designed to meet his particular needs and prepared within 30 days of his admission to the placement. The Act further states that the child has the right to participate in the development of the plan of care and in any changes made in it.

These rights are reflected in several of the final standards. Final standard PAS-06.1 requires that a preliminary foster care plan be prepared prior to selection of the placement for the child with the involvement of the child in a manner suited to the child's age and understanding. The standard also requires that the plan be finalized within 30 days of placement. Final standard PAS-06.2 specifies that the foster care plan must include the long-term goals and immediate objectives of foster care for the child designed to meet his developmental, emotional, social, medical and educational needs. Final standard FPS-07.1 requires regular review and if necessary amendment of the plan with the involvement of the child.

4. Food.

The Act states that the child in care has a right to receive meals that are well balanced, of good quality and appropriate for the child. Final standard FPS-08.1 requires provision to a child's foster parents of information on his eating habits so they can give him a balanced diet and it provides as well for special dietary or feeding arrangements where needed.

5. Clothing.

The Act states that the child in care has a right to be provided with clothing that is of good quality and appropriate for the child given his size and activities and prevailing weather conditions. Final standard FPS-09.1 requires provision to the child of clothing suitable to the child's age and foster family norms as well as his size and activities and the climate.

6. Medical and dental care.

The Act states that the child in care has a right to receive medical and dental care (subject to parental consent where the parent of the child retains a right to give or refuse consent to medical treatment for the child) at regular intervals whenever required and in a community setting whenever possible. A placing agency standard covering general health, medical and dental care, PAS-08.1, requires a determination of evidence of injuries and communicable diseases at the time of admission to care, a complete physical examination within 30 days and annual examinations thereafter as well as regular dental care. The standard also provides for further hearing, vision, psychological and psychiatric assessments and treatments. It requires an ongoing immunization program as well, except for children whose parents provide a statement of medical or religious exemption.

7. An education.

The Act states that the child in care has a right to receive an education that corresponds to his aptitudes and abilities and is provided in a community setting whenever possible. Two of the standards reflect the importance of the child's education. The placing agency standard stating the requirements for assessment, PAS-03.1, includes specific reference to the child's educational history and needs as does the standard dealing with the content of the foster care plan, PAS-06.2.

8. Recreational and athletic activities.

The Act states that the child in care has a right to participate in recreational and athletic activities that are appropriate for his aptitudes and interests in a community setting wherever possible. Attention to the recreational needs of the foster child is reflected in several standards. The placing agency standard dealing with assessment, PAS-03.1, includes play and recreational interests in the background information to be collected on the child as well as identification of any recreational services to be continued or provided to meet the child's needs. Final standard PAS-06.2 requires that these services and arrangements for the child be specified in the foster care plan. The child's interests and any hobbies or recreational activities the child enjoys are listed among the background information final standard FPS-02.1 requires to be obtained prior to placement selection. A final standard dealing with housing requirements for foster care, SDMS-03.1, provides for a check of the play space used by children on the premises or recreational areas within walking distance of a prospective foster home.

9. Participation in decision making.

The Act states that a child in care has a right to be consulted and to express his views to the extent that is practical given the child's level of understanding, whenever significant decisions concerning the child are made. These include decisions with respect to medical treatment, education and religion and decisions with respect to the child's discharge from the placement or transfer to another placement.

As noted above, involvement of a child of any age in his foster care plan in a manner suited to his age and understanding is required by final standard PAS-06.1. That standard requires the placing agency to seek the agreement to the plan of the child of 12 years of age or over, while standard FPS-07.1 requires the involvement of the child of any age in subsequent reviews of the plan. Placing agency standard PAS-16.2 requires the involvement of the child in developing a plan for continuing support to the child and his natural family after discharge.

10. Information concerning the child's rights and responsibilities.

The Act states that a child in care has a right to be informed in language suitable for his level of understanding, on admission to the placement, to the extent that is practical given his level of understanding of:

- the child's rights as stated in the Act
- a written procedure that a service provider is required by the Act to establish for hearing and dealing with complaints regarding alleged violations of the rights of children in care
- the existence of the Office of Child and Family Advocacy that may be established under the Act
- the review procedures available for children 12 years of age or older under the provisions concerning voluntary access to services
- the review procedures available in the case of a child who is in temporary detention, committed to secure or open custody, or held in a place of open custody
- the child's responsibilities while in the placement
- the rules governing day-to-day operation of the residential service, including disciplinary procedures.

6. FOSTER CARE PRACTICES: THE CHILD AND NATURAL FAMILY

The Foster Care Process

The proposals in this section of the consultation paper focussed on the foster care process and the child's experience in foster care. In addition to proposing a continuum of types of foster care, the section contained standards and guidelines for:

- screening, assessment and admission
- daily living experience, casework with the foster child and natural parent involvement
- foster care review
- termination
- aftercare
- recording, reporting and information disclosure.

As indicated in chapter 1, the discussion that follows deals primarily with the response to the proposed standards and the revisions made in the final standards as a consequence. The proposed guidelines are mentioned only in passing. As a result of revisions, deletions, the distinction drawn between generic placing agency standards and standards specific to foster care and changes of sequence in the interest of a more logical progression, the numbers of many final standards differ from those of the original proposals. The number of each final standard is shown clearly in the text, and the final standards for foster care and for placing agencies are grouped together for handy reference in Appendices D and E respectively.

The Foster Care Process Standards

FP-01 Screening

Proposed Standard

FPS-01.1 **The placement agency shall provide to the worker responsible for screening written guidelines and practices for the acquisition and evaluation of information to determine the need for service.**

Commentary

This proposal was strongly supported by most of the people who responded to it. One exception was a probation and aftercare (PACO) group who suggested that the standard did not apply to them because the admission of a child into the probation and aftercare system is determined by the family court judge. In their view the PACO system does not exercise control over its intake, hence has no screening process.

The Ministry believes that it is important for all workers involved in screening potential clients to have guidelines to assist them in determining service parameters and appropriate cases within those parameters.

Although the judge may order placement of a child in the probation and aftercare system, PACO's are often involved in screening of potential clients. By such means as pre-sentence reports, probation and aftercare officers make recommendations with respect to appropriate services, thereby assisting judges in arriving at a disposition and in determining cases appropriate for probation.

The proposal has been retained as a placing agency standard. It has been reworded to reflect the concept of an agency screening process more clearly. The final standard requires every agency to have a screening process and to provide written guidelines for workers involved in that process. It is numbered PAS-01.1.

PA-01 Screening

PLACING AGENCY STANDARD

PAS-01.1 The placing agency shall have a process for screening of potential clients to determine their need for service, and shall provide written guidelines to assist workers involved in the acquisition and evaluation of information to determine the need for service.

Proposed Standard

FPS-01.2 The placement agency shall ensure that any request for service by the agency is answered by a worker who is fluent in the language of the family seeking or referred for assistance and knowledgeable about its culture, or arrange for outside translation services when the language of the family is not spoken by an agency worker.

Commentary

There was general support for the intent of this proposal, to ensure that agencies answer requests for service in the language of the family seeking service. Most agencies that responded indicated that they in fact attempt to do so. Others acknowledged that they should be making more of an effort to hire workers fluent in the languages and knowledgeable about the cultures of the families they serve. A number of respondents, however, indicated that there would be practical difficulties in implementing this proposal if it were to become a standard. Some agencies said they would be unable to comply in communities where no translator was available who was fluent in the language of the family requiring service. Concerns were also raised that the immediate physical safety of the child must take precedence over the immediate availability of a translator fluent in a given language.

The Ministry continues to support the intent of the proposal, but agrees that agencies may not always have control over the availability of translation services. The proposal therefore will not be implemented as a standard. It has been changed to a placing agency guideline.

PLACING AGENCY GUIDELINE

The placing agency should ensure that any request for service by the agency is answered by a worker who is fluent in the language of the family seeking or referred for assistance and knowledgeable about its culture, or arrange for outside translation services when the language of the family is not spoken by an agency worker.

FP-02 Alternative Services

Proposed Standard

FPS-02.1 **The placement agency shall provide a written directory of services available to sustain families. The directory shall include:**

a) family social work and counselling services, homemaker services and day care services

b) the name, address, referral source and a description of each service

A copy shall be provided to all workers involved in screening.

Commentary

The intent of this proposal was for workers to have clear and ready access to a directory of community services to assist the families who come to their attention. An underlying aim was to require agencies to consider other services in their communities that might assist a child within his family before making the decision to take a child into care.

There was general agreement that a service directory should be available to workers providing services to children and their families. One association responding welcomed the proposal, observing that it would "avoid duplication of service and could result in alternative support". Suggestions were made for additions to the content of the directory, such as psychiatric, psychological and recreational services. However, there remained the issue of who is to compile and update the directory if none is currently available. Suggestions were made that compilation of a directory of community services did not fall within the mandate of a placing agency but more appropriately was the responsibility of a social planning council, a community information service or the Ministry. The question of who should be given this directory also appeared to be an issue. Some respondents said that rather than providing each worker with a copy, the agency should make a copy available to each office, each supervisor or each team.

Developing such a directory should not be an onerous task, since most agencies are already gathering information on services in their communities as part of the service planning process. Also, as suggested during the consultation, an existing directory may be acceptable. However, to simplify the work involved, the final standard has been revised to require the agency to keep an up-to-date list of services rather than to develop a directory and to make this list available to all workers involved in screening, rather than to provide a copy to each worker. The final standard leaves to the agency's judgement the types of services to be included. It is a placing agency standard numbered PAS-02.1.

PA-02 **Alternative Services**

PLACING AGENCY STANDARD

PAS-02.1 The placing agency shall keep up to date a list of services in the community that assist families and children, and may be used by the agency for referral. A copy shall be made available to all workers involved in screening.

FP-03 **Criteria For Out-of-Home Care**

Proposed Standard

FPS-03.1 **The agency shall provide written criteria for the problems, conditions or circumstances that necessitate use of out-of-home care.**

Commentary

The intent of this proposal was to ensure that placing agencies provide workers with clear criteria, based on agency policy and community attitudes, for determining what circumstances warrant out-of-home care for a child. There was in general very positive support for this standard. Some respondents requested the inclusion in the standard of more specific criteria such as those in the accompanying guidelines. On the other hand, one respondent expressed concern that excessively rigid criteria might restrict the judgement of the worker and thereby jeopardize the safety of a child who required out-of-home care.

In view of the difficulty of specifying detailed criteria that would have broad applicability, the final standard has been worded in a general way to require the placing agency to provide criteria for use of out-of-home care including foster care and children's residential care facilities. It is a placing agency standard numbered PAS-04.1.

PA-04 **Criteria For Out-of-Home Care**

PLACING AGENCY STANDARD

PAS-04.1 The placing agency shall provide written criteria for determining the need for the use of out-of-home care including foster care and children's residential care facilities.

FP-04 **Assessment**

Proposed Standard

FPS-04.1 **The placement agency shall conduct an assessment prior to the placement of a child, except in emergency or crisis situations, to determine the needs of the child and the possibility of restoring adequate family functioning. An assessment report shall be completed prior to planned placement and shall include:**

a) identifying information

b) referral data (source, date)

c) legal status of the child

d) any circumstances that have created or contributed to the need for intervention

e) a history of the family members including social stresses, personality characteristics and current functioning related to health, work, adequacy and management of income, marital status, family relationships, family dependencies and community relationships

f) the personality characteristics and habits of the child including current physical, social, emotional and intellectual development, educational history and current functioning related to health, home routines, school activities and play, recreational or social interests, relationships with family members and peers, attitude towards discipline and parental control

g) the child's history of emotional attachment, potential ability to deal with the experience of separation from his natural parents, and to benefit from living with another family, and his understanding of the situation

h) any special needs of the child arising from problems of drug and/or alcohol use, sexual orientation, behavioural disorder or delinquency including juvenile record.

Commentary

The commentary on this proposal in the consultation paper stated that an assessment must be completed to establish the existence of the conditions or circumstances that require out-of-home care. The worker must assess the psychological tie that exists between parent and child and determine whether placement of the child outside of his home is the most appropriate plan for the child. Appropriate, fully documented information would be required to assist in determining whether foster care would meet the needs of the child and in selecting the most appropriate home for him.

The Ministry attached importance to this proposal because it clearly focussed on the significance of out-of-home care for the child. Foster care today, like other forms of residential care, is meant to be more than the provision of a safe environment for a child. In addition to dealing with the potential impact on the child of separation from his natural family, the proposal reflected the possibility that the child who enters foster care may have particular needs or problems that will need to be addressed while he is in care.

Respondents were generally very positive with respect to the need for a written assessment on a child and his family prior to placement of the child in care. However, there was some comment that the assessment process in the proposal was overly prescriptive and that the proposal did not reflect the likelihood that much information was available to the agency from other sources. Also, the standard as written appeared to be somewhat ambiguous, leaving its full intent open to interpretation.

If the intention of the proposal was that it should apply only to planned placements, a need was seen for an additional requirement to provide a written assessment report on an emergency or crisis situation within a specified period of time following the placement. If the intention of the proposal was to require an assessment prior to placement in all cases, this was seen as impractical and often impossible to accomplish, at least at the level of information specified. Placing agencies reported that they attempt to glean as much of this information as possible and to the fullest extent possible either prior to or at the time of admission. However, in the case of emergency admissions and also of some planned admissions, all or some of this information may be unobtainable prior to placement. In contested cases where children are removed against the will of their parents, the parents are often reluctant to divulge family history information or to sign a consent to the release of information from other available sources. Some respondents indicated that the assessment determining the need for out-of-home care may be completed prior to the placement, but that it may not yet be available in written form. Others indicated that a preliminary assessment is followed by a more comprehensive determination of the child's needs after a period in care. Recommendations were made that the requirement for and the timing of the assessment of all children requiring placement, whether planned or on an emergency basis, be clarified.

A further suggestion was made that the standard indicate that an assessment report is required, but that the information to be included in the assessment report, i.e. items (a) through (h), be specified in guidelines. It was argued that guidelines would allow for omissions where the information specified was not available or obtainable and also for degrees of variance and appropriate professional judgement. It was also argued that sections (a) to (h) did not adequately cover factors pertaining to the dynamics of family relationships. Suggestions for additions to the specific lists of information included: section (f), "significant events"; section (h), "physical handicapping conditions", "medical problems", "emotional disorder", "need for special education placement" and "need for access to special services". It was suggested that reference should be made to any inadequacies that are judged to be detrimental to the child and to any handicaps or problems of the child that preclude the child's care in his own home, previously proposed as part of a separate standard. It was suggested as well that there should be more of a linkage between the assessment of the child's needs and the availability of resources to the family and agency to accomplish goals that might be outcomes of the assessment. It was also suggested that religious affiliation be added as a separate item.

The Ministry's intention is to ensure that as many children as possible receive a full assessment before the decision is taken to admit them to care. It must be recognized that this is not always possible. There also may be good reason to defer completion of an assessment until the child can be assessed in the context of his placement. The Ministry expects, however, that the agency will make a reasonable effort to obtain the required information and to complete the assessment report promptly as the basis for determining the course of service to the child. The final standard therefore requires the placing agency to make a preliminary assessment prior to the admission of a child to care, except in emergency situations, to determine the needs of the child and whether the child is likely to return home after residential care. Identification and consideration of members of the child's immediate and extended family or other adults known to the child and family who can meet the child's needs, previously proposed as a separate standard, are required as part of this preliminary assessment. The intent of this addition is to ensure that an effort is made at an early stage to explore the possibility of an arrangement that would prevent the child being brought into care where a better alternative is available. Within 21 days after placement of the child, in the case of either a planned or an emergency placement, the agency must complete a detailed assessment containing information on the child and his family relationships. The information requirements are specified as part of the standard. In the Ministry's view, these requirements are too important to be treated as guidelines, but still general enough to allow for agency judgement as to the type of approach to be taken to the assessment. Specific reference has been added, as suggested, to inadequacies in the child's home and handicaps or problems of the child, to any significant events occurring in any previous placement and to any psychiatric, psychological, remedial, vocational, social and recreational services required to meet the child's needs. The reasons for inability to obtain any of the specified information or to complete the assessment report within 21 days after the placement are to be noted in the child's file. The agency may use existing sources of information in developing the assessment provided, of course, that the information is up to date; the wording of the final standard does not preclude this. The agency is also free to seek out additional information that is not specified in the standard. The final standard is a placing agency standard numbered PAS-03.1.

PA-03 **Assessment**

PLACING AGENCY STANDARD

PAS-03.1 The placing agency shall:

a) conduct a preliminary assessment prior to the admission of a child to care, except in emergency situations, to determine the needs of the child and whether the child is likely to return home after residential care, which shall include the following information:

i) identifying information

ii) referral data (source, date)

iii) the legal status of the child

iv) any circumstances that have created or contributed to the need for intervention

v) any special needs of the child arising from drug and/or alcohol use, sexual orientation, behavioural disorder or delinquency including a juvenile record

vi) identification and consideration first of members of the child's immediate and extended family and secondly of other adults known to the child and his natural family who can meet the child's needs

b) complete an assessment report within 21 days after placement of the child, in the case of either a planned or an emergency placement, which shall include information in (a) and the following:

i) a history of the family members including social stresses, personality characteristics and current functioning related to health, work, adequacy and management of income, marital status, family relationships, family dependencies, and community relationships

ii) the personality, characteristics and habits of the child including current physical, social, emotional, and intellectual development, educational history and current functioning related to health, home routines, school activities and play, recreational or social interests, relationships with family members and peers, attitude towards discipline and parental control

iii) any inadequacies in the child's home that are judged to be emotionally and/or physically detrimental to the child

iv) any emotional, physical or developmental handicaps or problems of the child that preclude the child's care, management or treatment in his own home

v) significant events occurring in any previous placement

vi) the child's history of emotional attachment, his potential ability to deal with the experience of separation from his natural parents, and to benefit from living with another family, and his understanding of the situation

vii) any psychiatric, psychological, remedial, vocational, social and recreational services to be continued or provided to meet the child's needs.

The reason or reasons for inability to obtain any of the above information shall be noted in the assessment report. Where an assessment report could not be completed within 21 days after placement, the reason or reasons shall be noted in the child's file (SEE: SDMS-19.1).

FP-05 Criteria for Foster Care

Proposed Standard

FPS-05.1 **The agency shall provide written criteria to assist workers in determining whether foster care is an appropriate placement for particular children.**

Commentary

The intent in requiring explicit criteria for placement of children in foster care was to ensure that children placed in foster care are appropriate for community placement, and can both benefit from a family environment and be responsive to the parental guidance in a foster home. Such criteria should state clearly the expectations of what is to be achieved for children in foster care.

There was broad support for this particular proposal. A few respondents suggested that such criteria should be guidelines only, allowing a necessary level of flexibility and room for professional judgement. Other comments included the observation that despite objective criteria, there are times when a placing agency is required to place a child in a foster home even when it may not be the most appropriate type of placement, either because a judge orders a child in care or because no other more appropriate placement is available.

By requiring placing agencies to provide written criteria without specifying those criteria, the proposal permits agencies to use criteria they themselves develop. This approach respects agencies' professional judgement and permits agency discretion in the choice of placement. It also avoids putting the placing agency in a position of non-compliance if the agency is required to make a foster care placement that might be counterindicated by the criteria for appropriate foster care placement.

The proposal has been incorporated in final placing agency standard PAS-04.1, which requires the agency to provide written criteria for the use of out-of-home care. The selection of such criteria will be a matter for agency judgement. It is important that the criteria be clear about what is to be achieved for or on behalf of children while they are in foster care.

FP-06 Decision to Admit

Proposed Standard

FPS-06.1 **The decision to provide foster care for a child shall be made in a formal meeting including no less than the worker completing the assessment and a supervisor. The decision to admit shall be recorded in the assessment report, and the entry shall be signed by the supervisor.**

Commentary

This proposal was intended to ensure that no worker is forced to make a decision about the separation of a child from his natural family without benefit of consultation with an experienced supervisor. Most responses to this proposal supported the principles of accountability and joint responsibility between worker and supervisor for such a serious decision. A children's mental health centre requested addition to the standard of the related guidelines calling for the participation in the decision of the natural parents and the child and for a case conference involving other professionals. A couple of placing agencies found the wording of the proposal ambiguous in that the first sentence refers to "the decision to provide foster care" and the second refers to the "decision to admit". A few respondents suggested deletion of the reference to a formal meeting in favour of a phrase that would require that the decision be made by the worker in consultation with a supervisor, arguing that the decision to admit sometimes has to be made quickly and cannot be delayed until a worker returns to the office for a formal meeting. In such instances, they believed, telephone consultation should suffice. In addition, some placing agencies in the North noted that some admission decisions have to be made in remote communities where telephones are not available. Some probation and aftercare officers indicated that theirs is a supervisory position and that they are accustomed to making decisions of this kind independently.

The decision to admit a child to care is a serious and significant one that may have repercussions for the child and his family for several years, if not for their entire lives. Such a serious decision requires an "extra duty of care" to ensure the protection of the rights of the child in need of placement. Thus the responsibility for the decision to admit a child to care must not be borne by the worker alone, whatever his status, and at least must be shared between the worker and supervisor in a meeting that permits considered discussion. In situations where the worker involved in an admission is at the supervisory level, the responsibility for the decision to admit must be shared with his supervisor. The Ministry acknowledges that there may be situations, especially those in remote communities or involving a child in serious and imminent physical danger, where the worker must remove the child before he has an opportunity to return to the office to consult with a supervisor. In those situations, telephone consultation is seen as a minimum requirement. If a phone is not available or even taking the time to make a phone call would seriously jeopardize the child's safety, the worker must make telephone contact with a supervisor as soon as practicable following the decision to remove the child from his natural family.

The proposal has been retained as a placing agency standard with some revisions. The final standard deals explicitly with the decision to place a child in care. "The decision to provide foster care..." has been changed to read "the decision to place a child in care" and the title has been changed accordingly. The word "formal" has been deleted from the reference to the meeting between the worker and the supervisor. The decision is to be recorded in the child's file and where applicable, in the family's file. To take account of emergency situations where a meeting with a supervisor is not practicable, the requirement has been added that the worker contact the supervisor as soon as possible after the placement decision. The proposed guidelines concerning other participants in the decision will remain guidelines only. While the guidelines are good practice, it may not always be possible to implement them. The final standard is numbered PAS-05.1.

PA-05 **The Decision to Place the Child in Care**

PLACING AGENCY STANDARD

PAS-05.1 The decision to place a child in care shall be made in a meeting including no fewer than the worker completing the assessment and a supervisor. Where the decision cannot be made in such a meeting, the worker shall inform the supervisor of the placement as soon as possible thereafter. The decision to place the child shall be recorded in the child's file and, where applicable, in the family's file and shall be signed by the supervisor.

Proposed Standard

FPS-06.2 **A written recording shall be prepared for the child's permanent file stating:**

a) the inadequacies in the child's own home that are judged to be physically and/or emotionally detrimental to the child, and/or

b) the emotional, physical or developmental handicaps or problems of the child that preclude the child's care, management or treatment in his own home, and

c) the duration and planned outcome of the placement: return to natural parents, independence, permanent foster care placement, or adoption.

Commentary

There was general support in principle for this standard. It was suggested that (c) be revised to read "the anticipated duration and expected outcome of the placement". Some placing agencies saw this information as duplicative and suggested that the content of sections (a) and (b) should be included in the assessment report on the child and the content of section (c) should be in the plan of care. These sections have been incorporated in the other reports, as suggested, and the proposal has therefore been dropped from the final standards.

FP-07 Plan of Care

Proposed Standards

FPS-07.1 **The worker in consultation with his supervisor and the natural parents shall prepare a written plan of care for the child prior to selection of the placement for the child. The plan of care shall be recorded in the child's and the family's file, and include:**

a) **the long-term goals and immediate objectives of foster care for the child shall be designed to meet the needs the child may have including: developmental, emotional, social and intellectual as identified in the assessment**

b) **the time periods within which the outcome of each objective set are to be met**

c) **the methods for developing and/or maintaining the relationship between the child and the natural parents**

d) **respective individual responsibilities of the child, natural parents, foster parents and placement agency workers in achieving the objectives**

e) **a list of any services to be provided to the child by the placement agency or any other individual professional or agency.**

FPS-07.2 **The plan of care for the child shall be agreed to by the natural parents (SEE: footnote, p. 2) and shall include the involvement of the child of 12 years of age or over (unless he is incapable of doing so because of a developmental handicap). A copy of the plan shall be provided to the foster parents and the natural parents.**

Commentary

The proposed requirement for a plan of care was intended to ensure that the needs of the child, as identified in the process of assessment, will determine the care to be provided for the child. The plan was expected to include time-limited goals and objectives highly specific to the child's developmental, emotional, social and intellectual functioning.

Other requirements were intended to ensure that the child's natural parents continue to have a sense of responsibility for him and that the child feels that he has some control over his own future. Expectations were clearly stated for the inclusion in the plan of care of methods for developing and/or maintaining the relationship between the child and his natural parents and of the respective responsibilities of the child and parents as well as those of the foster parents and the placing agency. The natural parents and the child as well as the foster parents were to be involved in the development of the plan of care.

Respondents generally agreed with the concept of a written plan of care. Most supported the principle of involving natural parents, children and foster parents in developing the plan of care. Some suggested changes in the proposals, however.

In situations where placement of a child in foster care is voluntary, the proposed natural parent involvement in the plan of care appeared to pose no difficulty. In contested child welfare situations, however, respondents indicated that the natural parents' agreement to the plan of care would often be impossible to obtain. It was suggested that the agency be required to seek the agreement of the natural parents rather than to obtain it.

Other respondents thought that many children younger than 12 years of age can and should participate in developing their own plan of care. Respondents also objected to the assumption that developmentally handicapped children cannot speak on their own behalf, implicit in the clause "unless he is incapable of doing so because of a developmental handicap".

Suggestions were made that the detailed plan be finalized in consultation with the foster parents after thay have some experience with the child in care. It was also objected that the specific items to be included in the plan, sections (a) through (e) of proposed standard FPS-07.1, could not always be completed prior to selection of the placement for the child. One respondent recommended strengthening section (c) by adding reference to a plan regarding the nature and frequency of the child's visits or contacts with his natural parents. It was suggested as well that section (a) through (e) be made guidelines.

The final standards dealing with the plan of care have been revised to reflect these concerns. They also have been reorganized to take account of the distinction that is being drawn for licensing purposes between the placing agency and the operator of foster care service. They are grouped under the heading "Foster Care Plan".

A final placing agency standard numbered PAS-06.1 states requirements for participation in the development of a foster care plan for the child and the timing of completion of the plan.

The term "foster care plan" has been used to make clear that this plan is intended to be specific to the child's stay in foster care and is in addition to any more general plan of care made for his time in care, such as a plan of care more for a child found in need of protection under the Child and Family Services Act. The requirement that an effort be made to seek the child's agreement to the plan is consistent with the Child and Family Services Act which requires that views of the child be considered before placement in or transfer or discharge from a residential placement in cases of voluntary access to service. The requirement for the agreement of the operator and the foster parents to the plan is essential to its success.

A second placing agency standard, PAS-06.2, contains detailed requirements for the contents of the plan. The Ministry regards this as a critical standard that must not be reduced to the status of a guideline. It includes specific reference to the child's medical and educational needs, to the relationship of the child with his natural parents, to discipline, to services to be provided for the child and to the casework to be provided by the placing agency. A number of these provisions have been transferred to this context to make the requirements for the plan of care more precise and to reduce the overall number of final standards. A requirement that the plan of care be shared with the child of 12 years of age or over has been added. The plan may of course be shared with a younger child at the worker's discretion. It should be noted that the relationship between the child and his natural parents, as discussed on page 15, is intended to apply only where the parents are available and their involvement with the child is not prohibited by court order.

A final standard, FPS-01.1, establishes the operator's responsibilities in accepting a child for foster care and in carrying out the foster care plan.

PAS-06 **Foster Care Plan**

PLACING AGENCY STANDARD

PAS-06.1 The placing agency worker in consultation with his supervisor shall:

a) prepare a written preliminary foster care plan for the child prior to selection of the placement for the child with the involvement of the child in a manner suited to the child's age and understanding

b) seek the agreement to the plan of the child's natural parents and the child of 12 years of age or over

c) finalize the plan within 30 days of placement after consultation with the operator and the child's foster parents

d) obtain the agreement of the operator and the foster parents to the plan.

PAS-06.2 The placing agency worker shall include in the foster care plan:

a) the anticipated duration and planned outcome of the placement: return to natural parents, independence, permanent foster care placement or adoption

b) the long-term goals and immediate objectives of foster care for the child designed to meet his developmental, emotional, social, medical and educational needs

c) the respective individual responsibilities of the child, the natural parents, the operator, the foster parents and placing agency in achieving the objectives

d) the time period within which the outcome of each objective set is to be met

e) the methods for developing and/or maintaining the relationship between the child and his natural parents, specifically to include work with the natural parents to make the necessary changes in the home so that the child may return to their care as soon as possible, and visiting by the child with the natural parents and family

f) the approach or approaches to discipline to be followed with the child

g) arrangements for informing the school the child currently attends of the transfer of the child to the foster home, and where it is appropriate for the child to attend a different school, for enrolling the child in that school

h) a list of any psychiatric, psychological, remedial, vocational, social and recreational services to be provided to the child by the operator or any other agency or individual professional, and arrangements for the child to attend the services

i) the frequency, intensity and form of casework to be provided by the placing agency worker during the child's stay in the foster home, which shall include a visit by the worker with the child at least:

   i) once within the first seven days of placement

   ii) once again within the first 30 days of placement

   iii) once every three months thereafter.

The foster care plan shall be recorded in the child's file. Inability to obtain the agreement of the natural parents or the child of 12 years of age or older shall be noted in the plan. A copy of the plan shall be provided to the operator and the contents of the plan shall be shared with the foster parents, the natural parents and the child of 12 years of age or older.

FPS-01 Planning for Foster Care

Final Standard

FPS-01.1

The operator shall:

a) accept a child for foster care only after:

   i) A preliminary assessment of the child has been completed.

   ii) The immediate objectives of foster care for the child designed to meet the developmental, emotional, social, medical and educational needs of the child have been identified as required in PAS-06.2(b).

b) in planning for the child, review with the placing agency the assessment report completed within 21 days after placement of the child

c) participate with the foster parents in the finalization of the foster care plan to be completed within 30 days after the placement

d) consult with the agency and the foster parents to ensure that directly or through referral to the appropriate professional, school, clinic or hospital, as part of the foster care plan:

i) A developmentally, physically or learning-handicapped or emotionally disturbed child who is not already receiving remedial instruction or treatment for his handicap or disability or emotional disturbance receives an evaluation and/or treatment or consultation as needed

ii) Each developmentally handicapped child receives an individual program plan and each physically handicapped child receives a specific plan designed with the overall goal of moving towards independence in life skills for the child and containing time-limited, measurable objectives

iii) A plan is developed for the supervision of each emotionally disturbed child and his foster parents that states methods to be used and supports to be provided to the foster parents in managing and caring for the child.

Proposed Standard

FPS-07.3 The worker shall review the plan of care at least every 90 days, or when there is a change in the legal status of the child or the availability of the natural parents or the ability of the natural parents to carry out their part of the plan, or where there is a change in court order regarding their involvement. The child of 12 years of age or over (unless he is incapable of doing so because of a developmental handicap), the foster parents and the natural parents shall be involved in the review. A record of the date of the review and any changes in the plan of care shall be recorded in the child's file.

Commentary

There was general support for regular review of the plan of care. Respondents indicated that it was not always possible to involve the natural parents in the review, and suggested the addition of the phrase "wherever possible". Again, some respondents suggested deletion of the clause "unless he is incapable of doing so because of a developmental handicap". Others suggested that in the cases of some developmentally handicapped children in long-term placements, a review of the plan of care every 90 days was unnecessary.

The requirement for a review of the plan of care every 90 days was intended as a check on the child's progress and to ensure that the plan continues to respond to the child's needs. Even where little if any change in the child is evident, it is still a necessary requirement. It is also consistent with the requirement for review of the plan of care under the existing Child Welfare Act and the new Child and Family Services Act. A final standard that is specific to review of the foster care plan retains this provision. It has been changed, however, to reflect the concerns expressed about the wording of the requirements for involvement of children and their natural parents. Also, the requirements for a review when there is a change in the legal status of the child, or the availability of the natural parents, or when there is a change in court order regarding the involvement of the natural parents have been omitted. These are factors in the broader issue of the desirability of the child remaining in residential care, which is dealt with in a separate standard. Since the child is to be involved in the development of the plan in a manner suited to his age and understanding, the final standard provides for the involvement of the child of any age in the review of the plan. The added requirement that the supervisor examine the child's file and sign the record of the review is intended to ensure not only that the documentation is complete but also that the worker reviewing the foster care plan does not decide on changes in the plan in isolation. It was previously proposed as a separate standard. The final standard has been renumbered FPS-07.1 and titled "Foster Care Plan Review".

FP-07 **Foster Care Plan Review**

Final Standard

FPS-07.1

The operator shall review and if necessary amend the foster care plan with the involvement of the placing agency, the child, the foster parents, and the natural parents:

a) at least every three months

b) when there is a change in the child's placement.

The reason or reasons for lack of involvement of these parties shall be noted in the plan. The date of each review and any changes in the plan shall be recorded in the child's file. A supervisor shall examine the file at the time of each review to ensure that the required recording and documentation have been carried out, and shall sign and date the record.

FP-08 **Planning with the Natural Parents**

Proposed Standard

FPS-08.1

As part of the plan of care (SEE: FPS-07.1), the worker in consultation with his supervisor shall work with the natural parents to make the necessary changes in the home so that the child may return to the care of his natural parents as soon as possible.

Commentary

The intent of this proposal was to ensure that as part of the plan of care, arrangements are made to work with the natural parents on the circumstances and conditions that necessitated their child being separated from them. The standard underlined the importance of the natural parents' involvement in the child's stay in foster care. The commentary on the proposal noted that natural parents are likely to be hurt, angered and frustrated in situations where their child has been removed from their home. Thus they may be resistant, at least initially, to help from the worker and agency and to the idea of working with them to change the circumstances that led to the child's entry into foster care.

Generally speaking, there was strong support for the idea that the natural parents should participate in planning on behalf of their children as much as possible. This appeared to be the practice of most placing agencies. Some respondents argued, however, that the proposal was not applicable to children for whom permanent separation from their natural families is the plan from the outset. A child psychiatrist objected that it did not recognize that parents in child protection situations are often incapable of long-term planning. Other respondents suggested that this proposal did not go far enough to ensure that natural parents continue to meet their parental responsibility towards their child while he is in care. These respondents suggested a variety of ways in which natural parents could be encouraged to exercise their parental responsibilities towards their child in care. They suggested that parents be involved in key decisions such as choice of school and curriculum, in taking their children to school, the doctor or dentist, in meeting with school and medical personnel and in signing approvals for school and medical procedures. It was also suggested that parents be asked to make a financial contribution towards the care of their child at a level appropriate to their means.

As explained in the footnote on page 15, involvement of natural parents with their child in care is intended where the parents are available and where such involvement is not prohibited by court order. The Ministry continues to regard work by placing agencies with natural parents as a high priority where this is possible. The specific forms this involvement takes will be left to agency discretion. Since the broad requirement for work with natural families is covered in section (e) of final standard PAS-06.2, a separate standard is redundant. Proposed standard FPS-08.1 has therefore been deleted.

FP-09 **Placement Selection**

Proposed Standard

FPS-09.1 **The placement agency shall provide written policies stating the criteria that shall be met in the selection of a suitable placement for any child. The criteria to be used in selecting a placement shall include reference to:**

a) the child's cultural, racial, linguistic and socio-economic background

b) the child's religious background (SEE: FPG-22.1)

c) the child's developmental, emotional, social and physical needs

d) the child's interests, abilities, strengths and problems.

Commentary

The intent of this proposal was to ensure that consideration is given to the child's background and his particular needs when his placement is selected. It reflects one of the principles of service that are stated in the Child and Family Services Act: "Wherever possible services to children and their families should be provided in a manner that recognizes cultural, religious and regional differences."

There was basic support for the provision of written criteria to be used in the selection of an appropriate placement for a child. Most placing agencies have such criteria and attempt to use them as guidelines when placing children. However, limited foster home resources often result in the choice of the best available placement. Such considerations as the abilities of the foster parents to meet a child's needs and their skills in managing the child's problems are often given greater weight than other matching criteria. It was also suggested that the list of criteria included in sections (a) through (d) was far from exhaustive. Other criteria that were suggested included medical and educational needs, geographic location and nearness of the child's family, home community and other significant people in his life, food customs and the desire and capacity of the foster parents for natural family visits or contact.

Agencies may of course specify other criteria for the placement of children in foster homes in the area they serve. The final standard has been retitled "Criteria for Placement Selection" and transferred to the section on selection, development and management of foster homes where it is more appropriately placed. It is numbered SDMS-09.1. Two other final standards, FPS-02.1 and FPS-02.2, deal with placement information concerning the individual child and are discussed below.

The final standard has been revised to reflect some of these suggestions. Reference to kinship ties has been added to section (a). Reference to the child's medical and educational needs has replaced physical needs in section (c) which is consistent with provisions in other standards.

SDM-09 Criteria for Placement Selection

Final Standard

SDMS-09.1

The operator shall provide written policies stating the criteria that shall be met in the selection of a suitable placement for any child. The criteria to be used in selecting a placement shall include reference to:

a) the child's cultural, racial, linguistic and socio-economic background and kinship ties

b) the child's religious background

c) the child's developmental, emotional, social, medical and educational needs

d) the child's interests, abilities, strengths and problems.

Proposed Standard

FPS-09.2

The worker shall provide the following information to the person responsible for the placement of a child as soon as the decision for foster care is made:

a) identifying information on the child: full name, sex, birth date, address

b) the child's family background: size, birth order, cultural, racial, linguistic, religious and socio-economic background, parental and other family relationships

c) school information: name and address of school, name of teacher, grade in school, current performance level

d) medical data: name and address of family doctor and/or hospital used, medical problems of the child including physical handicaps or limitations on physical activity, allergies, current medication, history of illness and immunization record as available

e) a description of the child's interests and any hobbies or extracurricular activities the child enjoys

f) a statement of the child's strengths and weaknesses and any known psychological or psychiatric information available including behaviour problems, juvenile record or unusual habits

g) a statement of the child's needs in care

h) probable duration of temporary foster family placement and plans for parental contact and visiting of child.

Commentary

The proposal recognized that the person who is responsible for the assessment of the child and the recommendation for his placement in foster care is not necessarily the person who selects the placement. The proposal contained the information thought essential for choosing a placement for the child and for gaining the prospective foster parents' informed agreement to the placement.

Again, there was general support in principle for the intent of the proposal. Respondents indicated, however, that although they attempt to glean as much of the specified information as possible prior to placement, the level of detail specified is often impossible to obtain because the parents are either unavailable or uncooperative. A standard requiring that this information be provided prior to placement might put placing agencies in a position of being unable to comply.

It was also suggested that the information specified in sections (a) through (g) be incorporated in the assessment report and the information specified in section (h) be incorporated in the plan of care. It was suggested that this would have the combined effect of eliminating duplication and keeping the reporting requirements to a minimum. Again there was also the suggestion that the specific items of information to be provided be contained in guidelines rather than in a standard.

The final standard focusses on the responsibility of the operator to obtain background information on the child and his needs before accepting the child for foster care and before selecting a placement for him. The specific items of information listed in the proposal have been retained in the final standard. The primary responsibility for the assessment and the foster care plan rests with the placing agency rather than the operator. Also, some of the information required for a particular foster care placement decision is in addition to and in some respects more detailed and more specific to the child's daily life than the requirements for determining the child's broad needs and planning to meet them. Where the information requirements are the same, it is expected that the operator will avoid duplication of effort by obtaining the needed information from the placing agency. At the same time, the standard recognizes the possibility that the worker may not be able to obtain all the information until the assessment has been completed, and some of the information may never be obtained. The final standard is numbered FPS-02.1.

FP-02 Placement Selection

Final Standard

FPS-02.1

Before selecting a placement, the operator shall obtain the following background information from the placing agency:

a) identifying information on the child: full name, sex, birth date, address

b) the child's family background: size, birth order, cultural, racial, linguistic, religious, and socio-economic background, parental and other family relationships

c) school information: name and address of school, name of teacher, grade in school, current performance level

d) medical data: name and address of family doctor and/or hospital used, medical problems of the child including physical handicaps or limitations on physical activity, allergies, current medication, history of illness and immunization record as available

e) a description of the child's interests and any hobbies or recreational activities the child enjoys

f) a statement of the child's strengths and problems and known psychological or psychiatric information available including behaviour problems, juvenile record or unusual habits

g) a statement of the child's needs in care

h) the probable duration of foster care and the plans for parental contact and visiting of the child.

Where this information is not available at the time the placement is selected, the operator shall obtain the information from the agency by the time the assessment report is completed. Where this information cannot be obtained, the operator shall note the reason in the child's file.

Proposed Standard

FPS-09.3

The person responsible for placement shall recommend a foster family for a child only after:

a) the completion of a home study on the prospective foster family (SEE: SDM-03)

b) full disclosure to the foster parents of information on the child known to the agency

c) agreement by the foster family to the placement of the child on the basis of this information. (SEE: SDM-23)

Commentary

This proposal was intended to ensure completion of the home study process prior to the child's placement and involvement of the child's prospective foster parents in an informed decision on the placement. There was general agreement with this intent. Clarification was requested as to whether "the person responsible for placement" was the person responsible for placing the child or the person responsible for the selection of the foster home. Agencies that use provisional homes stated that placements in these homes are often made without a complete home study, and that such placements should be allowed to continue subject to appropriate guidelines for their use. As discussed in chapter 2, this proposal also generated a debate as to whether there should be "full disclosure" of information on the child to the foster parents or, to protect the privacy of the natural parents and other people mentioned in the child's file, disclosure of information relevant to the child's placement instead. One foster parent group feared that allowing subjective judgement on the part of the worker as to the information to be disclosed might result in the withholding of important information. The requirement that the foster family agree to the placement of the child on the basis of the information provided was seen as sound in principle and operationally desirable.

The person responsible for the selection of the foster home was the person intended in the proposal. The final standard specifies the operator instead, clarifying the operator's overall responsibility for the selection process. The requirements in the final standard will not apply to provisional homes which are treated separately in a placing agency standard as discussed on pages 162-166. The reference to the home study in section (a) has been changed to "an assessment of the family", reflecting a change in wording in the relevant standard, and the phrase "and approval of the family for fostering" has been added to clarify the desired sequence of events. As previously indicated, section (b) now requires the foster home worker to disclose to the foster parents "all information known to the operator that is relevant to the care of the child" rather than to make full disclosure. It must be acknowledged that selecting the information to be disclosed will require subjective judgement, but this is necessary given the importance of protecting the privacy of other people in the child's file. A new section (d) has been added, requiring that the operator obtain the placing agency's agreement to the placement. A requirement for a written statement concerning the needs of the child that cannot be met by the placement, of how the needs will be met and of any reservations or concerns of the foster family about the placement, previously a separate proposal, also has been added to this standard. The final standard is numbered FPS-02.2.

Final Standard

FPS-02.2

The operator shall select a foster family placement for a child and place the child with that family only after:

a) completion of an assessment of the family and approval of the family for fostering (SEE: SDMS-02.1)

b) disclosure to the foster parents of all information known to the operator about the child that is relevant to the care of the child (SEE: FPS-02.1)

c) agreement by the foster parents to the placement of the child on the basis of this information (SEE: FPS-02.2)

d) agreement by the placing agency to the placement.

A written statement of any needs of the child that cannot be met by this placement, of how the needs will be met and of any reservations or concerns expressed by the foster family about the placement of the child in their home shall be included in the child's file.

Proposed Standard

FPS-09.4

The recommendation for placement shall include a written statement of any needs of the child that cannot be met by this placement and any reservations or concerns expressed by the foster family about the placement of the child in their home.

Commentary

The intent of this proposal was to ensure that both the worker and the foster parents know that the child has needs that cannot be met in the foster home. This avoids a hidden expectation that the child will improve in these areas as a result of his stay with the foster family and helps the worker identify possible additional services that should be provided for the child. Placing agencies in general responded very positively to this proposal, suggesting that documenting reservations of the foster parents or the agency about a proposed placement would provide workers with protection in making placement decisions. It was suggested that this requirement be incorporated into the recording in both the child's file and the foster family file, to avoid requiring a separate report. It was suggested also that this proposal be incorporated into the plan of care by a respondent who thought that any agency reservations thus documented should and would thereby be shared with the foster family.

This proposal has been retained and, as noted above, incorporated in final standard FPS-02.2. In most situations, the operator will wish to share any reservations about the placement with the foster parents but this will not be made a requirement.

Proposed Standard

FPS-09.5 **Placement with members of the immediate and extended family shall be explored first. If placement with family members cannot be arranged, it shall be sought secondly from adults known to the child and his family who can meet the child's needs in care.**

Commentary

Respondents endorsed in principle the concepts of supporting the immediate and extended family's responsibility for a child who cannot be cared for by his own parents and of arranging for the child to live in a familiar environment. Most agencies reported that their general practice is to explore possibilities of placement with members of the child's immediate and extended family prior to taking a child into care. However, some respondents foresaw difficulties if this proposal were made a standard.

Problems may arise in contentious situations where the child is removed without the consent or against the wishes of his parents. The issue is whether the home of a member of the immediate or extended family is a "place of safety" under the Child Welfare Act or the Child and Family Services Act. The former defines a place of safety as a receiving home, a foster home, a hospital or any place or class of places designated as such by a Director under the Act other than a place of secure custody under section 24 of the Young Offenders Act (Canada). The latter defines it as a foster home, a hospital, or one of a class of places designated as such under the new legislation but not a place of secure custody for young offenders or a place of secure temporary detention. Some agency policies preclude and some family court judges do not recognize the home of an immediate or extended family member as a place of safety unless the child has been apprehended in a situation where the parent has left the children unattended. In their view, in situations where parents oppose an application to the court to take a child into care, placing the child with a member of the child's immediate or extended family may jeopardize the safety of both the family members and the child.

The proposal has been incorporated in final standard PAS-03.1, as one of the requirements for the preliminary assessment of the child. It should be noted that the wording of that standard does not require an arrangement for the child to live with the family members, only consideration of people who may be able to meet his needs. The final decision necessarily depends on the needs of the child, with consideration being given to a range of factors including protection and confidentiality.

FP-10 Preparation for Separation

Proposed Standard

FPS-10.1 The placement agency worker shall prepare the child, his natural parents and the foster family for separation. Preparation shall include: individual interviews with the child, the natural parents and the foster parents. In preparing the child for separation the worker shall explain fully to him the circumstances of his placement. An explanation shall be provided for the child in language appropriate to his age and level of understanding of where he is going, why and for approximately how long. A record of the date and result of the interview shall be made in the child's file.

Commentary

Most of the comments received on this proposal supported the intent of the proposal to prepare all concerned parties to the extent possible for the separation of the child from his natural parents. A concern was raised, however, that the proposal attempted, perhaps too strenuously, to specify activities, duties and responsibilities of staff and regulate practice in an area that requires flexibility and the exercise of professional judgement to meet individual needs.

Some of the activities specified in the proposal were cited as being infeasible, undesirable or problematic in particular situations. For example, while individual interviews may be desirable or necessary in some cases, joint interviews where the worker assists the parents in telling the child where he is going, why and for approximately how long may be more beneficial and effective in helping both child and parents deal with their respective emotional reactions to the separation plans. In the case of placement of an infant, an individual interview with the child would not be useful. Also, an individual interview may be appropriate for the prospective foster parents but separation management is often dealt with more effectively in group processes such as foster parent orientation, training and development courses. In cases of apprehension of a child, involuntary admission and even some voluntary admissions, the opportunity for preparation for separation in advance of the placement may be minimal. Inclusion in the proposal of reference to a single interview with the child implies insignificant recognition of the need to deal with the issues arising from separation both repeatedly and on an ongoing basis.

The final standard allows the placing agency greater flexibility and professional judgement in carrying out the responsibility for preparation of the various parties involved for the child's separation from his natural parents. The requirement for a pre-placement visit by the child to the foster family, proposed as a separate standard, has been incorporated in the placing agency standard. To reflect the respective responsibilities of placing agency and operator, the standard states that the arrangements for the visit are to be made in consultation with the operator. In addition to recording the manner in which the process of separation was carried out, the placing agency is to record the reasons why a pre-placement visit does not take place. The final standard is a placing agency standard numbered PAS-07.1.

PAS-07 **Preparation for Separation**

PLACING AGENCY STANDARD

PAS-07.1 The placing agency shall prepare the child and his natural parents for the separation of the child from them and shall include:

a) in consultation with the operator, a pre-placement visit by the child with the foster family in their home

b) recording in the child's file of the manner in which the process of separation was carried out and the reactions of the child and his natural family.

Where a pre-placement visit by the child to the foster home does not take place, the reason or reasons why shall be noted in the child's file.

FP-11 **Pre-Placement Visit**

Proposed Standard

FPS-11.1 **The child's worker or a designate approved by the director shall visit the foster home before the decision is made to place the child in the home. Prior to the actual placement, the child's worker shall accompany the child on a visit to the foster family and home. Only in the case of a newborn, or in the case of an emergency, or when the distance to be travelled prohibits the worker from doing so shall another adult approved by the director accompany the child.**

Commentary

The intent of this proposal was to encourage pre-placement visits to the foster home to assist in preparing the child, his natural parents and the foster parents for the impending separation. The visits by the worker alone and by the worker with the child were intended to establish a working relationship with the foster family with respect to the care of the child. The child's visit was intended as his introduction to the foster family and home and was expected to give the worker the opportunity to assist the child in recognizing his concerns about foster placement and to discuss these concerns with him.

Once again, there was general support for the proposal and most respondents indicated that they do attempt to arrange pre-placement visits whenever possible and desirable. Some respondents argued, however, that the standard as written would reduce the flexibility and restrict the exercise of the professional judgement that may be required for effective separation management.

One specific concern was related to the requirement that the child's worker "visit" the foster home before the decision is made to place the child in the home. This requirement was seen as being too onerous and unnecessary, especially since the foster parents will have been approved for placement of a child. It was suggested that the requirement to visit the home before the placement decision be replaced by a requirement to "contact" the foster home.

In addition, pre-placement visits for children were seen as unnecessary, impractical or undesirable in certain situations. It was suggested, for example, that such visits are not necessary in the placement of a newborn from the hospital where he was born. These visits are not always possible in cases of apprehensions or otherwise involuntary admissions to care. It was argued as well that the costs of such visits to remote communities, particularly in the north, can far outweigh the anticipated benefits. In still other cases, professional judgement may indicate that it would be far more disruptive to a child and his family to return the child to his own home after a pre-placement visit than it would be to allow him to remain in the foster home after the initial meeting with the foster parents.

The Ministry continues to consider pre-placement visits to the foster home as important for most foster care placements and it is evident that it has the support of the field in this. At the same time, it recognizes that such visits may not always be necessary. As previously noted, a requirement for a pre-placement visit has been incorporated in final standard PAS-07.1, which deals with preparation for separation.

Where the agency believes that an exception to the requirement for a pre-placement visit is indicated, the standard requires an explanation of the reason or reasons why. The proposal above has been deleted from the final standards.

FP-12 Community Preparation

Proposed Standard

FPS-12.1

Prior to the actual placement of the child or as soon thereafter as practicable, but not longer than 14 days, the worker shall, with the help of the foster parents and the natural parents, arrange for:

a) the transfer of the child's school records and the enrollment of the child who is able to meet the educational requirements to attend a school in the community where the foster home is located, or to continue to attend his own school, where appropriate.

b) a general medical examination of the child by a licensed physician

c) adequate clothing for the child and transfer of the child's personal possessions

d) attendance at psychiatric, psychological, remedial or vocational sessions as specified in the child's plan of care (SEE: FPS-07.1).

Commentary

The intent of this proposal was to ensure the provision of a sense of security for the child through continuation of his community involvement and established routines. Most respondents support this basic intent but a number suggested changes in the proposal. Assignments of responsibility and the timing of requirements were challenged.

As written, the proposal would require the worker to involve the foster parents and natural parents in making all the prescribed arrangements. The requirement to include them at all times was seen as excessive and often impossible or undesirable to achieve in practice. "Arranging for the transfer of the child's school records" was seen as the responsibility of the school rather than the placing agency. Also, where a child is placed in a foster home during the summer, it may not be possible to arrange for his enrollment in school within 14 days of the placement. An inconsistency was noted between the proposed requirement for a general medical examination within 14 days of placement and the requirement in proposed standard FPS-21.1 for a complete physical examination within 30 days of placement. Further, the Ontario Health Insurance Plan (OHIP) will not pay for more than one physical assessment per year. More flexibility was called for around the transfer of the child's personal possessions to allow for discretion on the part of the natural parents, the foster parents and the worker as to the quantity and types of items, particularly where valuable or potentially dangerous possessions are concerned, e.g., stereos, B-B guns and hunting knives. The proposed 14-day time period within which attendance at psychiatric, psychological, remedial or vocational sessions must be arranged was seen as problematic. Often the information available about a child and his family at the time of placement is insufficient to ensure a fully relevant assessment. It may take longer than two weeks of placement for the foster parents and the worker to identify problems of the child that indicate a need for a psychological or psychiatric examination. Also, in several areas of the province it is not always possible to arrange for a psychological or psychiatric assessment within two weeks.

To reflect these concerns and to simplify the final requirements, the proposal above has been deleted from the final standards. Arrangements concerning schooling and psychiatric, psychological, remedial, vocational, social and recreational services are provided for in final standard PAS-06.2, which deals with the child's foster care plan. A physical examination within 30 days of admission to care and annually thereafter is required by final placing agency standard PAS-08.1, which covers general health care and medical and dental services. Clothing is covered in final standard FPS-09.1 and hazardous goods in final standard FPS-12.1.

FP-13 Placement

Proposed Standard

FPS-13.1 A worker or volunteer known to the child, shall accompany the child to the foster home on the date of the actual placement. Only in the case of a newborn, or in the case of an emergency, or when the distance to be travelled prohibits a worker or volunteer known to the child from doing so shall another adult approved by the director accompany the child.

Commentary

The intent of this proposal was to ensure that the child does not arrive in the new situation when the impact of separation may be greatest without the company of someone he knows. The presence of someone the child knows should reduce the traumatic effects of separation and any anxiety or reservations the child may have about the placement.

This proposal was very much supported by most of the people who responded to it. It appears to be the general practice among placing agencies that the child's worker accompanies the child to the foster home on the date of the actual placement, except in cases of newborns and emergency placements. There were, however, a number of suggestions for change. These included suggestions for deletion of "volunteer known to the child", of "or when the distance to be travelled prohibits the worker or volunteer known to the child from doing so" and of "approved by the director". It was noted that the desired objective of always having an adult known to the child accompanying him on his placement may not always be achievable, especially in cases of emergency intake where the family is unknown to the placing agency.

In response to these requests for changes, the proposal has been modified and simplified in the final standard which requires that the placing agency and/or the operator arrange for a worker known to the child to accompany the child to the foster home on the date of the actual placement. An exception is allowed where the agency's and/or operator's designate approves another adult accompanying the child. The final standard also incorporates a requirement concerning the provision of written medical information necessary for the care of the child, previously proposed as a separate standard. It should be noted that other information gathered on the child as required by final standard FPS-02.1 is to be shared orally with the foster parents as required by final standard FPS-02.2. The final standard is numbered FPS-05.1.

FP-05 **Placement**

Final Standard

FPS-05.1

The placing agency and/or the operator shall:

a) arrange for a worker known to the child to accompany the child to the foster home on the date of the actual placement, except where the agency's and/or the operator's director or his designate approves another adult accompanying the child

b) ensure that the foster parents have received in writing by or at the time of the actual placement the health, medical and dental data necessary for the care of the child including specification of medical disorders, handicaps, allergies and limitations on activity.

Proposed Standard

FPS-13.2

The child's worker shall provide the foster parents prior to the placement or on the date of the actual placement with as much as possible of the following information on the foster child:

a) health, medical and dental data

b) description of psychiatric or psychological disturbances, behaviour problems, medical disorders, handicaps, limitations on activity, and allergies

c) school history and academic record

d) a description of the child's interests and any hobbies or extracurricular activities that the child enjoys

e) significant events occurring in any previous foster placement or other residential placements

f) specification of services to be continued to meet the child's needs.

Commentary

The intent of this proposal was to ensure that the foster parents are fully informed about the needs of the child they will be caring for, and that there is no disruption of continuity of services for the child. Respondents were generally very positive with respect to the need for such information on the child to be shared with the foster parents at the time of placement. Again, there were suggestions for both additions and deletions.

Suggestions for additions to the specific lists of information included the child's daily routines (especially in the case of an infant, toddler or pre-schooler) and habits, relevant background and social history of the child and his family, reasons for the placement and the child's reaction to the proposed placement and a description of the child's relationships with his own family or people in a previous placement. It was also suggested that the proposal be changed to state that "the foster parents shall be provided with..." since it is not always the child's worker who makes the placement, and that "continued" in section (f) be changed to "provided".

At the same time, it was suggested that the concept of sharing information with the foster parents be retained but the specific items designated in sections (a) through (f) be made guidelines. This would allow for omissions where the information specified was not available or obtainable and would also allow for the inclusion of material other than that specified.

On reviewing these comments, the Ministry has decided that much of the information specified in the proposal is not appropriate for a standard. The proposal above has been deleted from the final standards. The need to ensure that the foster parents receive the health, medical and dental data necessary for the care of the child including specification of medical disorders, handicaps, allergies and limitations on activity is recognized in section (b) of final standard FPS-05.1, which incorporates the requirement that this information be provided in writing. Final standards FPS-02.1 and FPS-02.2 cover other information relevant to the care of the child that is to be shared orally with the foster parents to obtain their informed agreement to the placement.

FP-14 Emergency Placement

Proposed Standard

FPS-14.1 **The placement agency shall have beds available for emergency placement. The number and location of emergency beds available shall be recorded and distributed to all workers involved in placement each week and updates as to the availability of beds provided each day.**

Commentary

Emergency intake or the unplanned placement of a child in foster care was presented in the consultation paper as a last resort that is usually prompted by a crisis in the child's immediate living situation. It was described as the least desirable alternative for the child since it precludes planning and preparation, and is likely to mean moving the child at least once to a longer term placement. However, it was recognized that emergency placements will happen and consequently the intent of the proposal above was to ensure that emergency placement is available to the agency when it is needed.

Children's Aid Societies and Probation and Aftercare Offices supported the proposal for placing agencies to have beds available for emergency placement and to record their number and location. Other agencies stated that this proposal was not applicable to them since they do not provide emergency placements. Agencies that were involved in emergency placement questioned the need to distribute information on emergency beds to all workers each day. They reported a variety of other acceptable and reasonable methods of updating information and distributing or making it available to appropriate staff.

The Ministry agrees that this proposal applies mainly to Children's Aid Societies and Probation and Aftercare Offices and is not relevant to agencies that are not involved in emergency placement. Also, the information should be available to relevant staff but is not required by all workers. The final standard requires that the operator of foster homes keep up to date a list showing the number and location of beds available for emergency placement but does not require the operator to have such beds. The operator is simply required to make this list available to workers. The final standard is numbered FPS-04.1.

FP-04 Emergency Placement

Final Standard

FPS-04.1 The operator shall keep up to date a list showing the number and location of beds available for emergency placement and shall make this list available to workers.

Proposed Standard

FPS-14.2 **The placement agency shall provide a written policy and criteria for emergency intake to assist workers to determine when unplanned placements shall be undertaken. The criteria for emergency intake shall include:**

a) The child is abandoned.

b) The child's immediate physical safety cannot be guaranteed due to abuse, self-injury or physical surroundings.

c) A runaway child is found.

d) The court orders the child's placement in foster care.

Commentary

The intent of this proposal was to ensure that emergency placement is undertaken only when absolutely necessary since it is seen as the most intrusive alternative for the child. While there may be strong pressure to apprehend a child quickly and find an immediate place for him, clear criteria for the use of emergency placement will help the worker assess whether the need is critical or placement of the child could be deferred and properly planned.

Respondents were generally very supportive of the need for this standard. Again, those agencies that were not involved in emergency placement thought that the proposal was not applicable to them. A number of Children's Aid Societies thought that this requirement was already covered by the mandate of the Child Welfare Act. Many respondents considered the list of criteria far from exhaustive and suggested inclusion of other criteria such as risk of serious emotional harm, refusal by a child to return home or refusal by a parent to take a child back or allow him to remain in the home. Being a runaway was not considered a sufficient condition for emergency placement by some respondents unless the child refused to return home or his parents/previous placement refused to take him back, or a period of time was required to arrange for his return, perhaps to a distant province.

The Ministry agrees that the list of criteria for emergency placement in the proposed standard is not exhaustive. To allow greater discretion in the determination of criteria for emergency placement, the specific criteria have been eliminated from the final standard. This will allow agencies that are not currently involved in emergency placement to determine whether this should be part of their role and to establish criteria accordingly. Children's Aid Societies will be expected to state explicit criteria for emergency placement. The Child and Family Services Act, like the Child Welfare Act, defines "a child in need of protection" in broad terms and does not specify circumstances in which a child is admitted to care on an emergency basis. The final standard is a placing agency standard numbered PAS-10.1. It incorporates several procedural requirements for emergency situations that were proposed as separate standards in the consultation paper and are discussed on the pages that follow.

PA-10 **Emergency Placement**

PLACING AGENCY STANDARD

PAS-10.1 The placing agency shall provide a written policy and criteria for emergency placement to assist workers to determine when emergency placements may be undertaken. Where removal of a child from the care of his parents in an emergency is being considered, the procedures shall include but not be limited to the following:

a) The worker shall consider first an arrangement for the child to live with members of his immediate and extended family. If an arrangement for the child to live with family members cannot be made or is not appropriate, a living arrangement shall be considered secondly with adults who are known to the child and his natural family and who can meet the child's needs.

b) If placement is required, the worker responsible for placement shall be provided with all available data on the child.

c) The worker shall determine the need of the child for medical and/or psychiatric assessment at the time of emergency placement to establish whether the child requires specialized care, treatment or placement, arrange for such assessment and record the decision in the child's file.

d) The worker in consultation with a supervisor shall record in the child's file within five days:

   i) the circumstances that resulted in emergency placement

   ii) the location of the child

   iii) the probable duration of the child's stay in emergency placement

   iv) the long-term goals and immediate objectives of the placement for the child designed to meet his developmental, emotional, social, medical and educational needs.

Proposed Standard

FPS-14.3 **In order to arrange for emergency foster placement of the child, the person responsible for placement shall be provided with all available data on the child.**

This proposal was intended to ensure that the person responsible for making the emergency placement has all the available information on the child to assist in the placement decision. There was general support in principle for the proposal. A number of respondents, however, considered it redundant because the requirement was contained in proposed standard FPS-09.2, where it was stated in far greater detail. It should be noted that that proposal and the final standard developed from it, PAS-06.2, are specific to foster care rather than emergency placement. Proposed standard FPS-14.3 has been incorporated in the consolidated placing agency standard numbered PAS-10.1.

Proposed Standard

FPS-14.4 **Emergency placement with immediate and extended family members shall be explored first. If placement cannot be arranged with family members, it shall be sought secondly from adults known to the child and his natural family who can meet the child's needs.**

Commentary

Here again, respondents agreed in principle with the concepts of supporting the responsibility of the immediate and extended family for the child and of placing the child in a familiar environment. A number of respondents suggested that the proposal was redundant in that the requirement for consideration of placement with immediate and extended family was covered by proposed standard FPS-09.5, which dealt with placement selection.

In the final standards as in the original proposals, a distinction is drawn between planned admission of a child to care and emergency placement. Thus the proposal above was not redundant. It has been retained as part of placing agency standard PAS-10.1. The wording of the provision recognizes the possibility that the home of a family member might not qualify as a place of safety for the child.

Proposed Standard

FPS-14.5 **The worker shall assess the medical and/or psychiatric needs of the child at the time of emergency intake to determine whether the child requires specialized care, treatment or placement. The worker shall record on the child's file any erratic or unusual behaviour observed.**

Commentary

This proposal was intended to introduce a requirement that the worker make a quick evaluation to determine whether the child has a medical or psychiatric need that would require specialized care or treatment and that would preclude his placement in a foster home. The response to the proposal indicates that because of the use of the word "assessment", this intention was not clear to all respondents, some of whom objected that the placing agency workers are not competent to carry out a specialized assessment. Those who understood its intent generally indicated support for it. Some respondents suggested that in addition to determining the child's needs for medical and/or psychiatric care and specialized care, treatment or placement, the worker should also determine the child's needs for medical or psychiatric assessment. Again, the agencies that considered emergency placements not appropriate for their operations stated that this proposal was not applicable to them.

Some respondents objected that although the intended quick assessment was desirable and sound, operationally it poses great difficulties. They suggested that frequently there are emergency situations where a worker believes that a child would be better off being placed in a hospital or a psychiatric facility rather than in a foster home, yet admission is denied either because of lack of bed space or because the child does not need to be hospitalized. Child welfare workers are constantly confronted with situations where adolescents are threatening or have attempted suicide, or have inflicted injuries on themselves and clearly would be at risk being left in their own homes. Hospital authorities may admit such an adolescent overnight for observation but in many cases will discharge him the next day.

This proposed provision has been reworded to clarify its intent and to add a reference to determining the need for medical or psychiatric assessment. As noted above, it has been incorporated in final placing agency standard PAS-10.1 which states requirements for agencies undertaking emergency placement. Thus the provision does not apply to agencies that do not make emergency placements. It is an important means of ensuring that every effort is made to meet the needs of the child requiring emergency placement. The difficulties a placing agency may encounter in arranging for assessment or specialized care or treatment on an emergency basis are not sufficient reason to neglect to make the attempt.

Proposed Standard

FPS-14.6 **The worker in consultation with the supervisor shall prepare a report for the child's file within 5 days stating:**

a) the circumstances that resulted in emergency placement

b) the location of the child

c) the probable duration of stay in emergency foster care.

Commentary

There was general support for the intent of this proposal that planning for a child admitted to care on an emergency basis take place as soon as possible after the placement. Again, some respondents commented that it was not applicable to agencies that did not make emergency placements. With respect to the broad documentation requirements, placing agencies commented in general that as much as possible of the required reporting should be incorporated into the agency's existing recording format to avoid adding to the present recording workload. It was suggested that the information would be contained in such documents as requests for placement forms and affidavits for the courts in case of apprehension, in the assessment and the plan of care, and in regular recording on the child and his family. It was also suggested that the "report" could take the form of an entry in the worker's case notes, the content of which would later be incorporated into the regular recording. It was suggested as well that consultation with a supervisor was not required, and that five days should be changed to five working days or seven days.

As indicated above, this proposal has been incorporated in final placing agency standard PAS-10.1, which has been worded so that it applies only to agencies making emergency placements. A provision that has been added to it requires the recording of "the long-term goals and immediate objectives of the placement for the child designed to meet his developmental, emotional, social, medical and educational needs". This is the same determination of the child's needs as must be made prior to a planned placement. It is agreed that the documentation requirements should be incorporated as much as possible into the existing recording format. Thus the provision now states that "the worker in consultation with a supervisor shall record in the child's file" rather than "prepare a report for the child's file". The proposed five-day period requirement for consultation by the worker with his supervisor in connection with the recording has been retained. Since the worker is required by placing agency standard PAS-05.1 to meet with the supervisor over the decision to place the child in care, it is reasonable to expect documentation of the emergency placement decision within this period. Again as previously discussed, it is important that serious planning decisions such as those involving the long-term goals and immediate objectives, not be made in isolation.

Proposed Standard

FPS-14.7 **The worker shall complete an investigation and an initial plan of care for a child in emergency care within 5 working days.**

Commentary

Most respondents to this proposal agreed with its intent, again that planning for a child admitted to care on an emergency basis take place as soon as possible after placement. One respondent commented that the reference to "an investigation" was vague and required definition and clarification. Some of the Children's Aid Societies commented that the proposal was redundant, since section 20 (2) of Regulation 96 under the Child Welfare Act stipulates that the society must investigate a complaint within 21 days where, in the opinion of the society, the child is apparently a child in need of protection and must record a tentative plan for the welfare of the child and steps taken to implement the plan. Also, section 21 of Regulation 96 requires that the society record a plan of care within 60 days after the admission of a child and review the plan every three months thereafter. Some respondents suggested that the detailed plan of care that would follow the initial plan should be finalized in consultation with the foster parents after some experience with the child in care.

This proposal has been deleted from the final standards. The requirement to initiate long-range planning for a child in emergency placement is now covered by section (d) (iv) of final standard PAS-10.1, which as previously discussed makes a distinction between emergency placement and foster care. The requirement for an investigation of the child's situation is more appropriately left to the child protection legislation. If, however, the agency places the child in foster care or designates the emergency placement a foster care placement, it will be required to provide a detailed foster care plan including input from the foster parents within 30 days of the placement by final standards PAS-06.1 and PAS-06.2.

Types of Foster Care

The consultation paper presented for consideration a continuum of types of foster care encompassing the three types identified previously in the paper Foster Care: A Discussion Paper. These were "regular" foster care, for children who can readily adapt to a foster family's routine, "supplementary" foster care for developmentally and physically handicapped children and "special" foster care for disturbed children. As discussed in chapter 3, the response to the continuum proposals indicated support for the concept of classifying, developing and managing foster homes as resources for children with particular needs. The general concerns expressed by the respondents were that the specific types of care proposed required further development and that it was not clear whether the document envisaged a single model of a continuum or a broad and relatively flexible framework that would allow agencies to move foster parents back and forth on a continuum in response to the needs of the children placed in their home at a particular time.

A number of agencies challenged the validity of the continuum typology as the document presented it on a fundamental level. They saw a potential rigidity in the compartmentalization of care along a continuum, questioned the rationale given for distinguishing among the types of care proposed and called for clear definitions of the types. Other comments were directed to the terminology used for the types of care, which some respondents saw as value-laden and judgemental and to the proposed format which respondents saw as more agency systems-oriented than child-centred.

Nor did the consultation provide a consensus on the approach that should be taken given the varying needs of the province's current foster child population and the levels of responsibility required for it. Some agencies employed the proposed typology or a similar system, others used a different typology and others had no comparable typology in place. A number of agencies, however, suggested that if any classification system were to be considered, it should be one that:

- assessed each child's individual needs
- designated the child, if need be, as requiring additional or specialized care
- compensated the foster parents for the provision of such care.

Agencies that had such a system in place viewed it as a less limited and more flexible approach than the proposed care typology. They saw it as reducing the risk of requiring children coming into care to fit within the parameters of the agency's foster care program by increasing the capacity of the program to adapt to the individual and changing needs of the children and as increasing the likelihood of providing continuity of care for the child in a single foster home.

In view of the lack of consensus on this question, the Ministry will not require implementation of a continuum of types of foster care. Instead each operator of foster homes that does not currently have a system for the classification of its foster home resources will be expected to develop such a system as part of its management framework. This approach will give operators the flexibility to determine a classification system that is consistent with their own operating requirements.

FP-15 Regular Foster Home

Proposed Standard

FPS-15.1 **The placement agency shall ensure that a private home where children are placed for regular foster care fulfills the following requirements:**

a) No more than four foster children shall be placed in the home at any time; foster children of common parentage or related to the foster parents are counted as one (SEE: footnote, p. 13).

b) No more than two foster children under two years of age shall be placed in the home at any time, unless the foster children are related to the foster parents.

c) The foster home shall be under the supervision of the placement agency.

Commentary

The Ministry's intent in restricting the number of children in a foster home was to prevent overcrowding and to ensure that children in foster care receive the individual attention they need. The intent in counting a sibling group as one child was to allow a sibling group larger than four children to have access to a foster home. The requirement for the foster home to be under the supervision of the placing agency was intended to ensure that the home receives regular supervision and support from the agency.

Four children was generally accepted as an appropriate limit for the total number of children placed in a foster home. There was some concern that the absence of a limit on the size of sibling groups could result in excessive numbers of children in some foster homes. It was suggested that sibling groups larger than four be allowed by exception only where the agency has decided that placing them together would benefit them more than placing them separately. Also, there were differences over the desirability of limiting the number of younger children. One respondent recommended that the number of children under the age of four be limited to two, while some respondents objected to limiting the number of children under the age of two years of age to two. They suggested that this would restrict agencies' professional judgement and flexibility, intrude into their decision-making responsibility and fail to take account of the individual skills and capacities of certain foster families to provide for greater numbers of infants and/or toddlers. There was general acceptance of the proposal that the foster home be under the supervision of the placing agency.

The Ministry believes that it is important that children placed in foster care receive the individual attention they need and that infants, in particular, need a great deal of attention and affection. The proposed limitations on total numbers of children have been retained in the final standard in support of this principle. In response to the concern about overcrowding as a result of sibling placements, the proposal to count such groups as one child has been dropped and the final standard now provides for an exception to the limitations with Ministry approval "where all of the foster children are of common parentage or related to the foster parents". The final standard is numbered FPS-03.1 and titled "Capacity of Foster Home". The requirement for supervision of the foster home has been transferred to a new final standard numbered SDMS-10.1, which requires of the operator to provide this supervision as part of its system for the selection, development and management of its foster homes.

FP-03 Capacity of Foster Home

Final Standard

FPS-03.1 The operator shall ensure that no more than four foster children and no more than two foster children under two years of age are placed in a foster home unless otherwise approved by the Director where all of the foster children are of common parentage or related to the foster parents.

FP-17 **Food and Nutrition**

Proposed Standard

FPS-17.1 **The placement agency shall provide the foster parents with information on the foster child's nutritional habits so that the foster parents can provide foods to the child that will constitute a balanced diet for him. Where a licensed physician prescribes a special diet for a foster child, the foster parents shall receive instructions from the placement agency in the preparation of such a diet.**

Commentary

The intent of the first part of this proposal was to ensure that the foster parents are as fully informed as possible about the eating habits and food preferences of the child and about food customs appropriate to the child's particular cultural, religious and/or ethnic background. The second part of the proposal was intended to ensure that the foster parents are fully informed about any special dietary or feeding arrangements for the child including a therapeutic diet, about any food allergies and about any other restrictions on food.

Most of the respondents indicated support for the intent of this proposal. Suggestions were made, however, that the proposal could be reworded to reflect the intent more clearly. The phrase "nutritional habits" has been changed to "eating habits" to incorporate the concepts of food preferences and cultural, religious and ethnic customs in the final standard, and reference to special feeding arrangements has been added. The final standard is numbered FPS-08.1.

FP-08 **Food and Nutrition**

Final Standard

FPS-08.1 The operator shall provide the foster parents with information on the foster child's eating habits so that the foster parents can provide foods to the child that constitute a balanced diet for him. Where a licensed physician prescribes a special diet for a foster child or special feeding arrangements are required, the operator shall provide the foster parents with instructions regarding the preparation of such a diet or the handling of the special feeding arrangements.

FP-18 **Clothing**

Proposed Standard

FPS-18.1

The placement agency shall ensure during the planned period of foster care that the foster child has a supply of clothing suitable to the child's size, age and activities, foster family norms and the climate, and that storage is provided for his clothing.

Commentary

This proposal was intended to ensure that the child has clothing that is appropriate to his age, size and activities, and is consistent with the norms of his foster family and with the climate where he lives and that he is given suitable storage for it. He should not be forced to wear worn-out discards or live out of a suitcase or box.

Most respondents who commented on this proposal were very supportive of it. Placing agencies indicated that these requirements are either in practice or in the process of implementation. They have been retained in the final standard which is numbered FPS-09.1.

FP-09 **Clothing**

Final Standard

FPS-09.1

The operator shall ensure during the period while the child is in foster care that the child has a supply of clothing suitable to the child's size, age and activities, foster family norms and the climate, and that appropriate storage is provided for his clothing.

FP-19 **Personal Belongings and Space**

Proposed Standard

FPS-19.1

The placement agency shall advise foster parents that the purchase of any goods for or by the foster child which pose a threat to the foster child's or the foster family's health and/or safety is prohibited. In the case of the purchase of automobiles, motorcycles and/or other forms of transportation for or by adolescents, the agency shall provide specific instructions to the foster parents.

Commentary

The consultation paper noted that personal belongings are particularly important to a child separated from his natural parents and home. The child should be encouraged to take belongings that are important to him to the foster home to help him see it as his home. Restrictions on what the child takes to the foster home should be limited to considerations of safety, health and the size of the item. The intent of the proposal above was to ensure that the foster child does not purchase for himself and the foster parents do not purchase for the child goods that could be hazardous to the child or the foster family.

Most respondents indicated support for the intent of the proposal. Some respondents, however, thought the use of the word "prohibited" in the first sentence misleading, since potentially dangerous items are often purchased for a child or made available for his use in everyday activities. Such items would include: archery equipment, camping or scouting knives, chainsaws, snowmobiles, tractors, motor bikes, automobiles and guns. These respondents argued that, operated with proper training and supervision under restricted conditions, such items could be beneficial for the child's growth and development. Other respondents suggested a policy statement and operational guidelines for the use of such items rather than a standard prohibiting their use.

The Ministry recognizes that the potential for harm may not be sufficient reason to prohibit the use of potentially hazardous goods. At the same time, the Ministry is concerned about reducing the risk of harm to the foster child and the foster family by ensuring that operators have adequate policies and procedures in place to limit the use of potentially hazardous items. It must be recognized that an extra duty of care is owed the child in care. The operator of numbers of foster homes has a greater responsibility to assure the safety of larger numbers of children than does the individual parent. The operator also has the responsibility to assure the safety of the foster families in those homes.

The final standard has been revised to require that the operator have a written policy and procedural guidelines concerning the purchase and possession of hazardous goods and advise workers and foster parents of the policy and the guidelines. The content of the policy is left to the operator's judgement. Operators may wish, for example, to include in their hazardous goods policies items other than those cited above, such as cribs, car seats, medication and toys. The final standard has been retitled "Hazardous Goods", and is numbered FPS-12.1.

FP-12 **Hazardous Goods**

Final Standard

FPS-12.1

The operator shall have a written policy and procedural guidelines with respect to the purchase and possession of any goods for or by the foster child that pose a threat to the foster child's or the foster family's health and/or safety, and shall advise workers and foster parents of the policy and the guidelines.

FP-21 **General Health Care, Medical and Dental Services**

Proposed Standard

FPS-21.1

The placement agency shall provide documentation that the following health provisions are made for foster children:

a) examination at intake for evidence of serious bruising or significant injuries

b) a complete physical examination by a licensed physician within 30 days of placement and at least annually thereafter

c) examination at placement for indications of communicable or contagious diseases, and a report of any indications of exposure to communicable or contagious diseases within 14 days of placement

d) dental examination by a licensed dentist within 6 months prior to admission or within the first 3 months after admission for children three years of age and older and at least annually thereafter

e) annual assessment of hearing and vision

f) establishment of an ongoing immunization program

g) inclusion in each foster child's file of cumulative health and dental records stating the date, name of physician or dentist and treatments provided the child while in the care of the agency.

Commentary

The intent of this proposal was to ensure not only that the child is examined on admission to care and receives regular check-ups, but also that a health record is kept that will be available to him when he leaves foster care. Respondents in general approved strongly of standards in the area of health care and medical and dental services. The proposed provisions were current practice in the majority of placing agencies reporting. However, the specific wording of some of the proposals was problematic for some agencies.

With respect to section (a), it was suggested that the word "intake" be replaced by "the time of admission" to clarify the intended timing. One agency recommended a five-day time limit instead. Many placing agencies objected that an unqualified requirement for an examination for bruising or injuries on admission was intrusive and would be unnecessary in many cases. They suggested that an examination be required only in situations where such bruising or injuries were suspected on the basis of the history or the specific behaviour of the child and other family members. An additional issue raised by this proposal was the nature, extent and manner of the examination: was it to be conducted by a worker or a medical practitioner? One agency suggested that the standard as proposed could not be implemented without adding staff.

Most respondents were supportive of the proposal in section (b) for a physical examination by a licensed physician within 30 days of admission. Most agencies reporting already have this requirement in place. In many cases, agency policy requires a medical examination either before the actual placement or within 48 hours of the admission to care. Again, it was suggested that "admission" be substituted for "placement" to clarify the intent. Some agencies suggested addition of "or a nurse practitioner" after "by a licensed physician" to allow flexibility in rural and isolated communities where there is no doctor or a doctor visits at intervals. It was also recommended that provision be made in the standard for implementation of recommendations for treatment following both the physical examination in section (b) and the dental examination in section (d). One probation and aftercare group noted that the medical and dental care of a child who is in foster care as a probationer remains the responsibility of his parents, although the medical and dental care of a training school ward in foster care is the responsibility of the Ministry.

Again, clarification was requested with respect to the intended nature, extent and manner of the examination for communicable or contagious diseases proposed in section (c). If an actual physical examination was intended, respondents suggested that this should be conducted by a licensed physician or a nurse practitioner and take place at the same time as the examination in (b). Agencies recommended that the child not be subjected to an additional medical examination unless there was some indication from the child, his natural family or his foster family shortly after placement or a suspicion on the worker's part that the child was himself a carrier or was in recent contact with a carrier of a communicable or contagious disease.

There was general agreement that children admitted to care should have a dental examination within a reasonable time after admission as proposed in section (d). It was suggested that any recommendations for further treatment be included in the plan of care. A northern agency noted that there were not enough dentists in the area to ensure service within three months. Another agency suggested changing the requirement to "six months after admission". A few respondents suggested the child should have more frequent dental examinations or care when necessary.

The requirement for an annual assessment of hearing and vision proposed in section (e) was considered by a number of respondents to be excessive and unnecessary unless the need for such an assessment were indicated. Many respondents suggested that the regular school testing should be sufficient unless a physician recommends otherwise. Others suggested that vision and hearing should be linked to the complete physical examination and a separate assessment should be required only if recommended by a physician.

There was general agreement with the requirement proposed in section (f) for the establishment of an ongoing immunization program for children in care. One agency, however, suggested that this might be an infringement upon parental choice if parents object to immunization. Another noted that it was often difficult to obtain records of previous immunization in the absence of a central registry.

There was also general agreement with the proposal in section (g) for the establishment and maintenance of health and dental records for children in care. In some situations, this would mean additional record keeping beyond what is current practice. The suggestion was made that if recommended treatments have not been carried out, the file should indicate the reasons.

The final standard assigns responsibility for ensuring the provision of medical and dental care while the child is in care to the placing agency. A number of changes have been made in the final standard to reflect respondents' concerns and suggestions.

Section (a) of the final standard has been revised to clarify that a full physical examination by a non-medical person is not intended. It requires "determination at the time of admission" rather than "examination at intake" of evidence of serious bruising or significant injuries. Where there are specific indications that suggest either a medical examination or treatment is urgently required, the examination or treatment must be arranged. Section (a) also requires that a determination be made at this time of indications of communicable or contagious diseases required in section (c) of the original proposal. The exposure period has been extended from 14 to 21 days to take into account diseases for which the incubation period is up to three weeks.

Section (b) has been revised to provide for the possibility of the required physical examination being conducted by a registered nurse in areas where a physician is not available.

With the deletion of the proposed section (c), the proposed section (d) has become (c). The proposed minimum requirement of at least one dental examination annually has been retained for standard setting purposes, but this does not preclude more frequent examinations or care as needed by an individual child. Proposed section (e), now (d), has been changed to require "further assessment and treatment of hearing and vision if indicated, as well as psychological and psychiatric assessments and treatments where necessary and available, a requirement that is consistent with Section 3(3) of Regulation 97 under the Child Welfare Act. Section (f), now (e), has been changed to reflect the position taken in the Immunization of School Pupils Act and the day nurseries standards on immunization and exemptions for reasons of health and religion. Section (g), now (f), is unchanged except that the reference to the agency has been replaced by a reference to the operator and reference to other professionals has been added. The final standard is a placing agency standard numbered PAS-08.1.

PA-08 **General Health Care, Medical and Dental Services**

PLACING AGENCY STANDARD

PAS-08.1 The placing agency shall ensure that the following medical and dental requirements are met for children in care:

a) determination at the time of admission of:

   i) evidence of serious bruising or significant injuries, and where there are specific indications that suggest either a medical examination or treatment is urgently required for the child, provision for the examination or treatment

   ii) symptoms of communicable or contagious diseases or indications of exposure to communicable or contagious diseases within 21 days prior to placement

b) a complete physical examination by a licensed physician or a registered nurse registered under the Health Disciplines Act, R.S.O. 1980, c. 196 within 30 days of admission to foster care and annually thereafter

c) a dental examination by a licensed dentist within six months prior to admission or within the first three months after admission or as soon as practicable thereafter for children three years of age and older and at least annually thereafter

d) further assessment and treatment of hearing and vision if indicated and psychological and psychiatric assessments and treatments where necessary and available

e) establishment of an ongoing immunization program, except for children whose parents provide a statement of medical or religious exemption

f) inclusion in each foster child's file of cumulative health and dental records stating the date, the name of the physician or dentist or other professional licensed or registered under the Health Disciplines Act, R.S.O. 1980, c. 196 and treatments provided the child while in the care of the operator.

FPS-21.2 Proposed Standard

The placement agency shall provide written policies, and procedures for workers, foster parents and natural parents stating the responsibilities and obligations of each party in regard to the provision of health care (including the administration of prescription drugs), hospitalization, medical and/or surgical treatment and emergency medical care.

Commentary

The intent of this proposal was to ensure that the agency clarifies for foster parents, workers and natural parents the responsibilities and obligations of each of these parties for meeting the medical needs of an individual child, particularly his need for hospitalization or treatment. There was general support among the respondents for the concept of policies and guidelines that would clarify procedures to be followed when accidents or illness occur. A number of agencies indicated that they did not have such a policy statement in place, and they foresaw some difficulties in implementing the proposal, especially with respect to natural parents. An Association for the Mentally Retarded stated that the agency did not have the mandate to require this of natural parents.

Among foster parent groups, consultation showed that there was considerable concern about the existing requirement of hospitals that agency staff must sign for admission of a foster child who is a ward to hospital. Both foster parents and agency staff wished this requirement reviewed. However, foster parents should be assured that admission of a child to hospital for emergency care should not require the signature of agency staff. It is only when a further course of treatment is in question that the agency must be involved.

The standard has been retained as written except that it is the operator who carries out the responsibility of providing the necessary policies and procedures. It is essential that the responsibilities and obligations of all persons concerned with the provision of health care for the child be clarified. While operators may not all have the mandate to involve natural parents in the provision of health care for their child while he is in the foster home, it is important that the degree or lack of involvement of the natural parents be clearly stated as a basis for clarifying the responsibilities and obligations of foster parents and the operator's staff. The final standard is numbered FPS-10.1.

FP-10 Health Care Responsibilities

Final Standard

FPS-10.1 The operator shall provide written policies and procedures for workers, foster parents and natural parents stating the responsibilities and obligations of each party in regard to the provision of health care, including the administration of prescription drugs, hospitalization, medical and/or surgical treatment, and emergency medical care.

FP-23 Daily Chores, Work and Use of Money

Proposed Standard

FPS-23.1 The placement agency shall advise the worker and foster parents of the agency's position regarding work done by the foster child inside or outside of the foster home and the allocation and use of money for spending by the child. The policies shall include:

a) a statement regarding the responsibility for daily chores or work assignments for foster children in the home

b) a request for notification of the agency when the foster child has accepted regular, part-time or full-time employment inside or outside of the foster home.

c) a statement regarding the personal use of money earned by or given to the foster child.

Commentary

The intent of this proposal was to ensure that foster children are not expected to perform daily chores or other work assignments that are greater than those for other children in the home, or are not appropriate for their age or size. A further intent was to provide a framework to assist foster parents in the task of teaching money management to children in care.

Most respondents indicated support for a policy regarding work done by foster children inside or outside of the foster home and the allocation and use of spending money by the children. However, several respondents found the specific contents of sections (a), (b) and (c) problematic, overly intrusive or undesirable. It was suggested that the intent of the proposal could be conveyed effectively through guidelines rather than a standard. Respondents also differed as to whether spending money should be earned, or children should receive a guaranteed allowance.

It is agreed that the original proposal was intrusive. The final standard simply requires that the operator have a written policy regarding work done and money earned by the foster child inside or outside of the foster home, and advise workers and foster parents of the policy. Agencies are, of course, free to expand this policy to include statements on the provision of allowances and the use of spending money. The final standard is numbered FPS-13.1.

FP-13 **Daily Chores, Work and Use of Money**

Final Standard

FPS-13.1 The operator shall have a written policy regarding work done and money earned by the foster child inside or outside of the foster home and shall advise workers and foster parents of the policy.

FP-24 **Privacy**

Proposed Standard

FPS-24.1 **The placement agency shall ensure that foster parents respect the foster child's right to privacy including his right to receive uncensored correspondence and unmonitored telephone calls, unless such censorship has been directed by a court or is provided for in the child's plan of care.**

Commentary

This proposal was intended to ensure that the child receives his correspondence and telephone calls without being censored or monitored. The child's privacy in this respect had been recognized as an issue in children's residential care facilities. The consultation paper pointed out that respecting the child's rights to participate in decision making and to reasonable enjoyment of privacy, as was intended by the proposal, is a way of teaching children respect for the rights of other people.

A significant majority of respondents to the proposal agreed with it. Some suggested that it be qualified in various ways. It was suggested that reference to sending correspondence and making telephone calls be added to the standard, and that the word "unopened" replace "unmonitored". A few respondents thought that the proposal was inappropriate as a standard or was not enforceable, and would prefer that it be made a guideline.

The respondents who raised concerns about the proposal considered this an area where agencies and foster parents should be able to exercise judgement depending on the age and circumstances of the child. Some concerns centred on use of the telephone and the possibility that the child might monopolize the telephone or run up unauthorized, costly long distance charges. Others arose from a desire to monitor the child's contacts and activities to ensure that he is not involved in something illegal or potentially harmful to himself or others.

As discussed in chapter 5, the Ministry continues to support the child's rights of communication and his reasonable enjoyment of privacy. The final standard has been revised to require simply that the operator have a written policy regarding the foster child's privacy in receiving and sending mail and in receiving and making telephone calls. As noted, the operator will be expected to reflect the rights of children in care under the Child and Family Services Act in that written policy statement. It is numbered FPS-14.1.

FP-14 **Privacy**

Final Standard

FPS-14.1 The operator shall have a written policy regarding the foster child's privacy in receiving and sending mail and in receiving and making telephone calls, and shall advise workers and foster parents of the policy.

FP-25 **Discipline**

Proposed Standard

FPS-25.1 **The placement agency shall provide written policies for workers and foster parents regarding discipline that explicitly set out acceptable and unacceptable practices. Instruction to foster parents on acceptable methods of discipline shall be provided by the placement agency as part of orientation for all foster parents (SEE: SDM-22).**

Commentary

This proposal did not receive much comment or criticism. All agencies that responded to the proposal agreed with it and the overwhelming majority said that its provisions were current practice. Most agencies have written disciplinary policies of varying depth and detail, and most are currently instructing their foster parents on acceptable methods of discipline.

There was recognition in some responses that foster parent participation in development of disciplinary policies is desirable. One agency commented that the policies "would have to be written with foster parent input", another that it "will take time to develop policy satisfactory to the agency and the foster parents".

A few respondents found the tone of the proposal negative and one requested deletion of the clause "that explicitly set out acceptable and unacceptable practices". Another agency suggested that "this standard should be changed to promote behavioural management techniques consistent with the child's needs as determined in the plan of care."

More general concerns expressed by some agencies were a perceived need for Ministry direction on acceptable practice and the likely cost of implementing the proposal. One agency commented: "If instruction is to be provided by the placement agencies the Ministry should define acceptable practices and provide funds for training foster parents." Another, reflecting on the proposed ban on corporal punishment, wrote: "What can be done with regard to alternatives to corporal punishment will be done only with long-term education of foster parents that should be provided by and through Ministry programs. Money would be required for educational materials."

In the view of the Ministry, the proposal should remain essentially as written. It is important that foster parents know what disciplinary practices are acceptable for use with children in their care, and it is appropriate for agencies to define acceptable disciplinary practices for their communities rather than for the Ministry to prescribe practices for the province as a whole. The final standard has been renumbered FPS-15.1.

FP-15 **Discipline**

Final Standard

FPS-15.1

The operator shall provide:

a) written policies regarding discipline that set out acceptable and unacceptable practices for workers and foster parents

b) instruction on acceptable methods of discipline to all foster parents as part of foster parent orientation (SEE: SDMS-08.1).

Proposed Standard

FPS-25.2 **Unacceptable disciplinary practices shall include:**

a) harsh or degrading responses that could result in the humiliation of a child or the undermining of a child's self-respect

b) deprivation of basic needs including food, shelter, clothing or bedding

c) extensive and prolonged withholding of emotional response or stimulation after the undesirable behaviour of the child has stopped

d) placing or keeping a child in a locked room

e) threatening removal of the foster child from the foster home in an attempt to control behaviour

f) corporal punishment by foster parents or by another child or group of children condoned by foster parents

g) punching, shaking or shoving or other forms of aggressive physical contact.

Commentary

Commenting on this proposal, some respondents found it an essentially negative approach to discipline and recommended that it be replaced by a list of acceptable practices. In the view of the Ministry, the "extra duty of care" towards children in care makes it imperative that unacceptable disciplinary practices be clearly stated in a standard. For the reasons cited in the discussion of the preceding proposal, specification of acceptable practices will be an agency responsibility. Some acceptable practices are touched on in the discussion of unacceptable practices that follows. Those cited are not to be construed as the only acceptable practices nor is the list of unacceptable practices in the final standard an all-inclusive list.

Provision (f), banning corporal punishment, raised the greatest debate. As discussed in chapter 2, there was considerable support for the Ministry position. There were also strong objections, including:

- a perceived need to use corporal punishment with certain children
- the possibility of differential treatment of foster children and natural children
- lack of trust in foster parents
- conflict with societal norms or values
- potential for emotional abuse.

The proposal as a whole was criticized for intrusiveness into foster families' privacy and for difficulty of monitoring and enforcement, and was seen by some respondents as a potential problem in recruitment and retention of foster parents. Agencies were also concerned about the consequences of a violation of the proposal: would they be expected to close any home where a violation was known to have occurred?

The Ministry's position as discussed in chapter 2, is that none of the arguments cited would justify a policy that permitted use of corporal punishment with a child. This position is based on:

- the right of the child to freedom from corporal punishment
- respect for the child's human worth and dignity
- the extra duty of care of the state towards the child in care
- the need to break any existing pattern of violence in the child's upbringing.

This position is consistent with the position taken by the Ministry in setting policy for children's services in general, most recently in the Child and Family Services Act.

As discussed in Chapter 2, the Ministry believes that given training and support in the use of a range of methods of discipline, foster parents should feel less need and desire to resort to corporal punishment. Feedback from the consultation indicated that agency staff as well would benefit from training to assist them in helping foster parents find appropriate and acceptable alternatives to physical forms of discipline.

Many of the placing agencies and operators have become sensitized to foster parents' fears of the possible consequences of a violation of the proposed ban on corporal punishment, i.e. closure and/or criminal investigation. The Ministry believes that operators of foster care programs need to keep current their understanding of the strengths and capabilities of their foster families providing care, a keen awareness of the nature and extent of the demands being placed on them by the child in their care and knowledge of the extent to which their abilities are being stretched beyond their limit. Within this context the operator has a responsibility to ensure that appropriate levels of support, consultation, training and relief are available to foster parents and in place at appropriate times, to avoid situations that will place the child at risk for corporal punishment. Where violations of the prohibitions against its use occur, agencies will be expected to exercise sensitivity and good professional judgement and to consider the degree of any physical or emotional harm caused the child and the circumstances underlying its use in deciding whether to remove the child from and/or retain the foster home as part of their foster care services. While agencies will be expected to account to the Ministry for this exercise of professional judgement, the Ministry in enforcing this standard will recognize the situations where physical restraint might be used to prevent a child from causing harm to himself or others.

Section (a), barring "harsh or degrading responses that could result in the humiliation of a child or the undermining of a child's self-respect", drew general approval. Some respondents questioned, however, how such responses would be measured. Also, there was a suggestion that reference to humiliation be deleted on the basis that this is a subjective concept, experienced differently by different people. Another comment suggested that the notion of intent be incorporated in the provision along with the qualifying phrase "repetitive and constant". In the final standard, this provision has been qualified only by the addition of the word "deliberately". Even one premeditated use of such a response is unacceptable. While the responses of individuals to embarrassment or ridicule differ and perceptions of what constitutes humiliation differ, a sensitive foster parent soon recognizes a foster child's areas of vulnerability and should not deliberately exploit them.

Section (b), dealing with "deprivation of basic needs including food, shelter, clothing or bedding", likewise received broad support. It was pointed out, however, that a distinction should be drawn between denial of food as a punishment and denial of food as a logical consequence of behaviour of a particular kind. Some respondents suggested, for example, that making it clear to an adolescent who is persistently late for meals that if he does not arrive at the appointed time to eat he will have to wait until the next meal is served might be an acceptable consequence involving withholding of food.

Section (c), which prohibits "extensive and prolonged withholding of emotional response or stimulation after the undesirable behaviour of the child has stopped" also received general acceptance. It was suggested, however, that the phrase "extensive and prolonged" was vague and the time period involved should be related to the age of the child. It was also suggested that the inclusion of this phrase suggested that withholding of emotional response that was not extensive or prolonged would be acceptable. This provision has been retained as written. It would not be appropriate to specify a time limit for withholding of emotional response from the child. There may be situations in which ignoring a child for a brief time, always in proportion to the nature and seriousness of his undesirable behaviour, might be acceptable. Here again, the foster parent will exercise judgement.

Section (d), which prohibits "placing or keeping a child in a locked room", also proved generally acceptable. There was a suggestion, however, from a foster parent that this practice is a useful last resort and might be permitted with a time limit of 15 minutes. Also, a behaviour management program for developmentally handicapped children living in the community had on occasion recommended and assisted in the use of "confinement time-out procedures for instances of aggression and non-compliance that could not be modified through less intrusive treatment procedures", and suggested that the standard allow for use of "this therapeutic procedure under appropriate professional supervision".

The Ministry continues to view placing or keeping a child in a locked room as an unacceptable practice. However, removal of a child to or "time out" in a quiet room that is not locked, such as the child's bedroom for a limited time would be an acceptable practice when carried out as part of the child's foster care plan. Section (d) has been retained as written.

Section (e), which bars a threat to remove the foster child from the foster home in an attempt to control his behaviour received broad support from those who responded. Threats to an angry child are often perceived by the child as a challenge or dare that may precipitate exactly the response one is attempting to prevent. On the other hand, the proposal drew some objections that removal from the home can be a logical consequence of the child's behaviour and should be an option for either foster parents or agency staff. This is a valid point. A distinction is made between advising the child that removal from the foster home may be the consequence of continued undesirable behaviour and an emotional threat to remove the child.

In connection with section (f), there were several requests that the Ministry define corporal punishment. An official definition is not required; in dictionaries in common use and in common usage it is defined as punishment inflicted on the body.

In addition, the reference in section (f) to punishment by other children condoned by foster parents evidently puzzled some respondents. It should be clarified that the section refers to use of other children in a physical "enforcer" role and not to fights arising between or among children. In this connection it was also suggested that the section be expanded to prohibit corporal punishment by babysitters and other persons playing caretaking roles. This would be beyond the jurisdiction of the agency whose agreement for the provision of foster care service is with the foster parents.

As indicated in chapter 2, section (g), which bars "punching, shaking or shoving or other forms of aggressive physical contact", drew some suggestions that qualifications were needed. It was objected, for example, that a distinction should be drawn between aggressive contact and self-defence and between such contact and the exercise of restraint in the case of a child who is a danger to himself or others. It was pointed out that some therapies may employ aggressive physical contact such as behaviour management programs for severely developmentally delayed "biters". It was also suggested that this provision be replaced by "punching, shaking or shoving in a context of anger" on the basis that the proposed wording might prevent some playful or helpful aspects of physical contact. In the view of the Ministry, there is no place for aggressive physical contact in foster care. In enforcing this standard the Ministry will recognize those situations where physical restraint might be used to prevent a child from causing harm to himself or others. However, returning violence in response to an assault is not self-defence and is unacceptable. This section remains as written.

The final standard has been renumbered FPS-15.2.

Final Standard

FPS-15.2

Unacceptable disciplinary practices shall include:

a) deliberately harsh or degrading responses that could result in the humiliation of a child or the undermining of a child's self-respect

b) deprivation of basic needs including food, shelter, clothing or bedding

c) extensive and prolonged withholding of emotional response or stimulation after the undesirable behaviour of the child has stopped

d) placing or keeping a child in a locked room

e) threatening removal of the foster child from the foster home in an attempt to control behaviour

f) corporal punishment by foster parents or by another child or group of children condoned by foster parents

g) punching, shaking or shoving or other forms of aggressive physical contact.

Proposed Standard

FPS-25.3

The placement agency shall have policies and procedures relating to the investigation of complaints regarding foster parent actions that contravene the provisions of FPS-25.2. These shall be made available to workers and foster parents during orientation.

Commentary

There was little reaction to this proposal. One agency opposed making these policies and procedures available during orientation. Given the sensitivity of the issue of discipline, both workers and foster parents should be made aware of them during orientation in the Ministry's view. The final standard which remains as written has been transferred to the section titled "Investigation of Complaint Against Foster Family" where it is appropriately placed and has been renumbered SDMS-17.2.

SDMS-17 Investigation of Complaint Against Foster Family

Final Standard

SDMS-17.2 The operator shall have written policies and procedures relating to the investigation of complaints regarding foster parent actions that contravene the provisions of FPS-15.2. These shall be made available to workers and foster parents during orientation.

FP-27 Education and Learning

Proposed Standard

FPS-27.1 **The placement agency shall assign a worker and/or the foster parents to meet quarterly with the foster child's teacher and/or school principal and/or other school personnel, as necessary, to assess the child's adjustment and progress in school.**

Commentary

The consultation paper observed that foster children may exhibit blocks to learning or be resistant to schooling after their separation from their natural parents. Academic or learning problems that interfere with success in the classroom may be closely related to the physical, social, emotional and psychological disruptions the foster child experiences. The intent of the standard was to provide for the establishment of close and ongoing communication with local school authorities, principals and teachers to ensure that the child's educational program meets his learning potential, that he is making an acceptable adjustment to the program and that his social needs are met.

Nearly all respondents supported regular contact with the school to monitor the child's progress. Respondents in education particularly welcomed the proposal, citing a need for improved communication with schools on behalf of foster children and indicating a willingness and even eagerness, as one response put it, to serve as a "resource in the child's out of home care".

Several respondents, however, objected to the requirement to meet "quarterly". Some placing agencies thought that this was in many cases unnecessary and in some cases undesirable. One respondent thought that the proposal assumed that all children placed in care have academic or school-related problems. Several expressed concern that requiring such frequent meetings may single out children in care as problematic. It was suggested also that the proposed degree of contact was not necessary in the case of long-term Crown wards. Some respondents noted that a requirement for quarterly meetings did not necessarily correspond with local school board reporting and interview policies. At the same time, some placing agencies thought that more frequent contact might be required in some cases. Many respondents favoured making the timing of contact a matter of judgement, and some suggested that it be placed in a guideline instead of a standard. One respondent commented that provision should be made for the presence of the natural parents where possible.

The Ministry views regular contact with the school as part of the "extra duty of care" owed to the child in care. In recognition, however, that frequent meetings with school personnel may draw undue attention to the child, the proposed requirement for quarterly meetings has been changed to quarterly contact in the final standard, which is numbered FPS-11.1. It should be noted that attention to the child's educational needs is also required as part of the assessment of the child and as part of the foster care plan. It is expected that the respective responsibilities of the placing agency, the operator, their workers, the foster parents and the natural parents for liaison with the school will be included in the foster care plan as appropriate. Where more frequent contact with the school than is required by final standard FPS-11.1 appears desirable, this may of course be arranged.

FP-11 **Education and Learning**

Final Standard

FPS-11.1 The operator shall assign a worker and/or the foster parents to contact quarterly the foster child's teacher and/or school principal and/or other school personnel as necessary, to assess the child's adjustment and progress in school.

FP-28 **Transportation and Travel**

Proposed Standard

FPS-28.1 **The placement agency shall advise foster parents of the agency's position regarding the arrangement of travel for foster children inside and outside of the Province of Ontario.**

Commentary

The intent of this proposal was to ensure that the agency advises foster parents of its position regarding travel for foster children inside and outside of the province. Foster parents had at times been uncertain as to whether it was appropriate for them to travel with foster children and what identification was required. There was agreement to the proposal from almost all respondents although agencies had not all put it into practice. The final standard establishes this as a requirement for operators of foster homes. It is numbered SDMS-13.1.

SDM-13 **Transportation and Travel**

Final Standard

SDMS-13.1 The operator shall advise foster parents of the operator's position regarding the arrangement of travel for foster children inside and outside of the Province of Ontario.

FP-29 **Supplementary Foster Home**

Proposed Standard

FPS-29.1 **The placement agency shall ensure that a private home where children are placed for supplementary foster care fulfills the requirements of standard FPS-15.1.**

Commentary

The intent of this proposal was to ensure that the number of children placed in a home for "supplementary" foster care is no greater than four, that no more than two are under two years of age and that the home is under the supervision of the placing agency. The proposal has been deleted from the final standards because the continuum of care typology proposed in the consultation paper has been dropped.

FP-30 **Developmental Plan**

Proposed Standards

FPS-30.1 **As part of the plan of care (SEE: FPS-07.1) the placement agency shall provide directly, or through referral to the appropriate professional, school, clinic or hospital, a**

developmental plan for each physically or developmentally handicapped child. The developmental plan shall be designed with the overall goal of moving towards independence in daily skills for the child, and contain time-limited, measurable objectives.

FPS-30.2 **The placement agency shall ensure that a physically, developmentally or learning-handicapped child who is not already receiving remedial instruction or treatment for his handicap or disability is either referred for an evaluation or provided with treatment or consultation. Written recommendations and/or reports resulting from the referral shall be recorded in the child's file and provided to foster parents.**

Commentary

The intent of the proposed requirements for a developmental plan was to ensure that any child entering care who is physically or developmentally handicapped receives appropriate service. Most respondents supported the proposals and indicated that the provision of such a plan either was their practice or was in the process of implementation. Some respondents commented that there was no need for a separate standard and suggested that the proposals be incorporated in the plan of care.

Since the proposed continuum of care typology has been dropped, these proposals have been incorporated in final standard FPS-01.1 which states the requirements the operator must fulfill in planning for the foster child. The standard requires the operator to consult with the placing agency and the foster parents to ensure that directly or through referral to a professional, school, clinic or hospital, an appropriate plan is provided.

FP-31 Special Foster Home

Proposed Standard

FPS-31.1 **The placement agency shall ensure that a private home where children are placed for special foster care fulfills the following requirements:**

a) No more than two foster children shall be placed in the home at any time; foster children of common parentage or related to the foster parents are counted as one (SEE: footnote, p. 13).

b) No more than one foster child under two years of age shall be placed in the home at any time, unless the foster children are related to the foster parents.

c) At least one foster parent shall be in the home on a full-time basis.

d) The foster home shall be under the supervision of the placement agency, and the foster parents shall be directly trained by or under the auspices of the placement agency to manage and/or provide treatment for emotionally disturbed or behaviourally disordered children.

Commentary

The consultation paper observed that provision for a specialized program permits the placement of children with severe emotional disturbances or behaviour disorders in foster care. The paper described "special" foster care as being provided by foster parents trained and supervised by a placing agency to manage and/or provide treatment for these children. The children may require intensive supervision, a high level of structure or the planned use of child management techniques to remain in the community. A foster family accepting such a child must have a high degree of commitment to the child and be prepared to change both lifestyle and daily routines to meet the child's needs. The proposed restrictions on the numbers of these children placed in a special foster home and the requirement for the presence of at least one foster parent recognized the difficulty of caring for the children, the emotional stress experienced by foster parents in keeping them safe and under control, as well as the level of planning and recording required.

Many respondents objected to the proposal to limit the number of children in special foster homes to two or the number of children under the age of two years to one. They argued that this would restrict professional judgement and flexibility, intrude upon the decision-making responsibility of agencies and fail to take into account the individual skills and capacities of certain foster families to provide for greater numbers of children requiring specialized care. In addition, many foster parents and staff thought that depending on the circumstances, one or two "regular" care children could be placed in the home concurrently with one or two "special" care children which the proposal would not allow. Some agencies reported that they have as many as four specialized foster care placements in one foster home and that these have proved successful. Agencies also commented that the suggested limitations of two "special" care children and one child under the age of two would be appropriate as guidelines but not as standards. They strongly suggested that agencies be allowed some discretion and flexibility with respect to numbers within the proposed maximum of four children.

Similarly, the proposal to require that at least one foster parent be in the home on a full-time basis met with some concerns regarding restrictions on professional judgement, degree of intrusiveness and the individual skills and capacities of certain foster parents to provide for the children entrusted to them while maintaining a job outside the home. Many respondents suggested that whether one or the other foster parent takes a full-time or a part-time job outside the home would depend largely on the age and particular needs of the child, whether the child attended school full time and whether one foster parent took a job outside the home during those hours when the other parent was at home. Respondents suggested that this proposal be changed to a guideline and also that it read that "at least one foster parent should be available at any time to respond to the needs of the child".

There was general acceptance of the proposal to require that the agencies provide training to the foster parents who are providing special foster care.

The proposal has been deleted from the final standards because the proposed continuum of care typology has been dropped.

FP-32 Child Management Plan

Proposed Standards

FPS-32.1 **Every child placed in special foster care shall have included in his plan of care (SEE: FPS-07.1) an individual, written management plan detailing the management methods and procedures to be used when problem behaviour occurs. The foster parents shall have a copy of the management plan prior to admission of the child or within 5 working days of placement. The plan shall be reviewed monthly, or whenever there is a change in the child or his circumstances, and revised accordingly.**

FPS-32.2 **The child management plan shall be written by the worker in consultation with the foster parents. The plan shall include the following:**

a) the name, position and contact number of the worker providing supervision for the special foster home

b) a description of the management methods or procedures to be used and the types of behaviour or conditions for which such management methods or procedures are to be used, with clear guidelines on when to begin a procedure and when to terminate it

c) the name and training of each person in the foster home using the management methods or procedures

d) provisions for supervision and monitoring by the worker of the use of the management methods or procedures

e) provisions for recording and reporting the use of the management methods or procedures.

Commentary

The intent of these proposed standards was to ensure that any management methods, techniques or treatments to be used with a child to effect change in his behaviour, attitudes or personality are predetermined and recorded. These requirements were intended for the protection of all those involved: the child, since the methods to be used and the persons who may use them must be specified, and the methods must be regularly reviewed; the foster parents, since the plan provides clear direction on what to do to manage a child who may not be able to control his own behaviour; and the agency, since the plan clearly states the services to be provided in the home to meet the child's needs. The standard addressing the plan itself was intended to require that specific safeguards are in place: assignment of a specific worker to the case to provide supervision to the foster parents and case coordination for other staff, controlled use of management methods and monitoring, review and reporting practices. There was general agreement with the proposal in FPS-32.1 to detail the management methods to be used with a child whose behaviour problems necessitate special care. Here again, it was suggested that a separate standard was not needed and that the proposed requirement could be incorporated into the plan of care. There was some support in principle for the proposals in FPS-32.2, but respondents raised concerns about the increased documentation it would entail. The requirements for documentation over and above the child's plan of care were seen as cumbersome, time consuming, overly formalized, excessive and unnecessary, particularly section (c). A number of respondents suggested also that this proposal was intrusive and that it would overregulate the day-to-day lives of the foster family. One respondent objected that an important distinction must be drawn between the parental or caretaking role of the foster parent and the therapeutic or treatment role of the clinician.

Since the proposed continuum of care typology has been dropped, proposed standard FPS-32.1 has been incorporated in the final standard dealing with the operator's responsibility for planning for the child in care, FPS-01.1. The content of proposed standard FPS-32.2 has been omitted from the final standards.

FP-33 Casework With Foster Child

Proposed Standards

FPS-33.1 **The frequency, intensity and form of casework shall be determined according to the goals of the foster child's plan of care and in cooperation with his foster parents, and included in the child's plan of care.**

FPS-33.2 **The worker shall visit the foster family home and talk with the foster child alone within the first week of placement. The worker shall continue to see the foster child alone every 3 months during the visit to the foster home as required by SDMS-25.1.**

Commentary

Casework in the foster care process is the provision of intensive support to a foster child as he experiences any problems while in care. This is particularly likely to be needed as the child makes the adjustment to separation from his natural family and his foster home. Casework may be provided by an agency worker or by the foster parents under the supervision and guidance of the worker. A strong relationship with foster parents who provide necessary guidance and understanding on a daily basis may be the only casework the child requires. The intent of the two proposals above was to ensure, through regular visits by the worker, that the child receives support that is determined by his needs as set out in the goals of his plan of care.

There was general agreement with the first proposal. A few respondents found the proposal ambiguous and unclear. The intent of the word "form" was questioned; the specific type and degree of staff involvement were also questioned.

Respondents questioned whether the second proposal was intended to state minimum requirements for individual contact with the child only or to state minimum requirements for contact with the foster family as well. A number of respondents held that contact with the foster child alone is not in many cases age-appropriate nor is it in some situations culturally appropriate. Other respondents suggested that in some cases it is undesirable or inappropriate in that excluding the foster parents from the worker's contact with the foster child may create problems between the foster child and the foster family. They suggested that care be taken not to exclude foster parents from important contacts if foster parents are to be considered colleagues in the provision of care to the children who are entrusted to them. This was not to suggest that there are no times when worker contact with the child alone should occur, rather that determining when such contact is appropriate should be left to the discretion of the worker and the foster parents. Other respondents suggested that worker visits in the foster home should be more frequent than within the first week of placement and every three months thereafter.

The first proposal has been incorporated in final standard PAS-06.2, which requires inclusion of casework plans in the foster care plan with provision for a visit by the placing agency worker with the child at least once within the first seven days of placement, once again within the first 30 days of placement and once every three months thereafter. This revision requires an additional visit within the first month of placement and is consistent with the requirement under the Child Welfare Act. The second proposal has been deleted from the final standards. This will allow agencies the flexibility they desire in determining requirements for individual contact with foster children as part of casework with the children.

FP-34 Natural Family Involvement

Proposed Standards

FPS-34.1 **The placement agency shall provide written policies and procedures for workers and foster families regarding natural parents that provide for the continuity of the natural parents' and child's relationship.**

FPS-34.2 **The foster child's plan of care shall include a statement regarding the ways in which the relationship between the foster child and his natural family is to be maintained and developed, specifically to include visiting by the natural parents and family.**

Commentary

These proposed standards were written to emphasize the importance of encouraging natural parent contact with foster children. The consultation paper observed that where return of a foster child to his natural family is the goal, visits with the natural family contribute to family unity and the child's well-being.

Most respondents strongly supported the first proposal. They saw policies and procedures that would provide guidance for workers and foster families regarding natural parent involvement as useful. They advanced a few caveats for those who would write such policies and procedures, suggesting that such policy statements should:

- be flexible enough to allow for individualized case management decisions
- recognize the situations where continuity of relationships with the natural family is deemed not to be in the best interest of the child
- take into consideration the need for foster families to be in agreement with a specific level of natural family involvement for the children placed in their home.

There was general agreement with the second proposal also. Again, respondents commented that the standard should reflect those situations where continuity of natural family relationships is deemed not to be in the best interests of the child and the need for the foster family to be in agreement with the planned level of natural family involvement.

The first proposal has been retained in a final standard numbered FPS-06.1, while the second has been deleted from the final standards. Natural family involvement for the individual child will be dealt with as part of the foster care plan, as required by section (e) of final standard PAS-06.2. This will give foster parents the opportunity to agree to the level of involvement planned. As stated on page 15, natural parent involvement is not expected in situations where the parents are not available or their involvement is probibited by court order.

FP-06 Natural Family Involvement

Final Standard

FPS-06.1 The operator shall provide written policies and procedures for workers and foster families regarding the involvement of natural parents with their child in care.

Proposed Standard

FPS-34.3 **The placement agency and the foster parents shall use the legal surname of the foster child and encourage the foster child to use his legal surname in:**

a) school attendance and records

b) applications for seeking employment

c) medical records

d) hospital records

e) driver's licence

f) court appearances

except where the director of the placement agency gives permission for use of the foster parents' surname by the child as being in his clinical judgement in the best interests of the child.

Commentary

There was general agreement with this proposal. There were suggestions that "or his designate" be added following "the director of the placement agency" and that "legal" be deleted to allow for situations where a child of a common law union has been using a surname for most his life that is different from his legal surname.

The proposal has been deleted from the final standards. While the proposed requirements concerning use of the foster child's own surname were accepted as good practice, this is a matter that, on reflection, appears best left to agencies to decide with foster parents on an individual case basis.

FP-35 Foster Care Review

Proposed Standard

FPS-35.1 **The placement agency shall review the progress of each child in foster care every three months for the first year the child is in care and annually thereafter. The review shall be recorded in the child's file and include:**

a) a statement of the factors necessitating foster care for the child (SEE: FPS-06.2)

b) a statement regarding any change in the conditions that originally necessitated foster care

c) any changes in the plan of care in regard to duration of placement and planned outcome (SEE: FPS-07.1)

d) the progress of the child towards objectives set in the plan of care (SEE: FPS-07.1)

e) a description and evaluation of the child's adjustment to the placement in terms of resolving separation from his natural parents, adaptation to daily life in the foster home, attendance and progress in school, and participation in recreational and other leisure time activities

f) the degree of natural family involvement achieved (SEE: FPS-07.1 and 08.1)

g) a description of any child behaviour problems and management methods or procedures used and the results

h) a statement of purpose for the continuation of foster care for the child and the objectives to be reached during placement.

Commentary

The consultation paper defined foster care review as an evaluation on a regular basis of the progress towards the outcome of care for the foster child as well as the child's adjustment and progress towards specified objectives in placement. The paper stated that the factors that necessitated placement, the objectives for meeting the child's needs and the methods used must be reviewed regularly to determine the appropriateness and desirability of continuing foster care for the child.

There was general agreement with the intent of proposed standard FPS-35.1. A number of respondents, however, indicated that annual review after the first three months was not an acceptable minimum. Several agencies cited their own practice of a review every three months and several Children's Aid Societies noted that the proposal was at variance with the expectation for a review every three months as required by section 21 of Regulation 96 under the Child Welfare Act. Others thought that this proposal duplicated proposed standard FPS-07.3 which called for a review of the plan of care every 90 days, and was therefore redundant.

The final standards distinguish more clearly than the proposals between review of the plan for the child while he is in foster care and review of the appropriateness of his being in care. The final version of the standard above deals with the appropriateness for the child of being in care and has been retitled "Placement Review". A placing agency standard numbered PAS-11.1, it requires the placing agency with the operator to review the progress of each child in residential care every three months for the first year the child is in care and annually thereafter. Final foster care standard FPS-07.1 is specific to review of the foster care plan. It requires the operator to review and if necessary amend the foster care plan with the involvement of the placement agency, the child, the foster parents and the natural parents at least every three months. The differences in the required timing of the reviews reflect the fact that children are tending to spend shorter periods in care than previously and relatively few are in care for more than a year. Review of the foster care plan is of course an opportunity to identify the need for review of placement in care sooner than final standard PAS-11.1 requires.

PA-11 Placement Review

PLACING AGENCY STANDARD

PAS-11.1 The placing agency with the operator shall review the progress of each child in residential care every three months for the first year the child is in care and annually thereafter, or when there is a change in the legal status of the child or the availability of the natural parents or when there is a change in the court order regarding the involvement of the natural parents. The review shall be recorded in the child's file and include:

a) a statement of the factors necessitating residential care for the child

b) a statement regarding any change in the conditions that originally necessitated residential care

c) any changes in the duration and planned outcome of the placement

d) the progress of the child towards objectives set for the child

e) a description and evaluation of the child's adjustment to the placement in terms of resolving separation from his natural parents, adaptation to daily life in the placement, attendance and progress in school and participation in recreational and other leisure time activities

f) the degree of natural family involvement achieved (SEE: PAS-06.2 and FPS-02.1)

g) a description of any child behaviour problems and management methods or procedures used and the results

h) a statement of purpose for the continuation of residential care for the child and the objectives to be reached during placement.

FP-36 Re-Placement

Proposed Standard

FPS-36.1 The foster parents shall be consulted on and involved in the decision for re-placement and a record of their recommendations about re-placement made in the child's file. The placement agency shall always change the foster child's placement in any of the following circumstances:

a) The foster child has or develops special care needs that cannot be or are not being met in the present foster home.

b) The foster child has special educational or physical or emotional treatment needs that cannot be met in the local community.

c) The requirements for daily living experience (SEE: FP-16 through FP-22) are not being met in the present foster home.

d) A confirmed incident of abuse or neglect occurs.

e) A conflict has developed between the foster child and foster parents resulting in a request for change in placement.

Commentary

The intent of this proposal was to ensure that careful consideration is given to any contemplated change of placement for a foster child. The consultation paper stressed that each separation and change may hinder the child's emotional and intellectual growth and development, and every effort should be made to reduce interim placements or placements that are not planned to last until the child's stay in foster care ends. At the same time, requests for placement change cannot be ignored and quick action by the worker may avert placement breakdown.

The proposal as written met with resistance from a number of the respondents. The proposed requirement that the placing agency "shall always change" the placement in the given circumstances seemed at odds with the emphasis in the commentary on reducing placement change and the concept of continuity of care for the child. Respondents suggested that "shall always change" be replaced with "shall consider changing" or "conduct a review of" the placement in specified circumstances. They thought that the focus should be on eliminating difficulties and resolving conflicts by providing the services the child requires and support, training and relief to the foster parents, rather than setting standards for re-placement. One agency objected to recording the recommendations of the foster parents as an excessive requirement. The individual sections of the proposal also presented problems for many of the respondents.

Some respondents argued that inability of the foster family to meet specific needs or a lack of services in the community is not in itself a justifiable reason for moving a child. One respondent considered the issue of unmet needs a matter of judgement and suggested as well that the needs could be met with support, training, relief or other service. It was suggested also that it may be possible to develop or supply a service that is lacking in the community. For example, if a child has special educational needs that are not being met in the community, the recent special education legislation (Bill 82) requires the local Board of Education to provide for these needs, which can be arranged through an agreement with another school board. Finally, in view of the traumatic effects of a change of placement, these respondents indicated that it would be preferable for the question of unmet needs to be dealt with as a matter of professional judgement that would be exercised through a review of the placement, rather than a standard conferring an automatic mandate to re-place the child.

In section (d), it was suggested that "confirmed" be changed to "verified" for consistency with the Ministry's standards and guidelines for the management of child abuse cases, and to ensure that the incident was properly documented and proven by means of a Ministry, an agency or a police investigation. Again, respondents indicated that such an incident should not result in automatic re-placement but trigger a placement review instead. A decision to remove the child would be based on a number of factors including his age, the circumstances of the incident, the degree of injury, whether the foster parent reported the incident to the worker and whether it was an isolated incident.

There was strong opposition to the proposed requirement that the agency always change the foster child's placement where a conflict has developed between the foster child and the foster parents resulting in a request for a change in placement. Many respondents noted that manipulative adolescents or children have been known to initiate requests for re-placement to avoid important issues or consequences. It is also possible for children who have already experienced the pain of rejection to request a move when they begin to fear rejection by members of the foster family with whom they have begun to form an attachment. In all of the above situations, moving the child would be detrimental to his continued well-being. Respondents suggested that re-placement should be considered only in those situations where a conflict between the foster child and the foster parents is assessed by the worker and his supervisor as being so severe that resolution is impossible and that it is in the child's best interests to be replaced.

The proposal has been deleted from the final standards. In most situations, the stability of the child's placement is an overriding concern and professional judgement should be exercised as to whether other factors justify re-placement. Any case of suspected abuse or neglect must be investigated by a Children's Aid Society and the investigation team will determine whether the child remains in the foster home or is re-placed.

Proposed Standards

FPS-36.2 **The placement agency shall meet with the foster child and the foster parents within 5 days of a request for a change in placement by the foster parent and/or the child to determine whether a change in placement is needed. The decision to move the child shall be made in a meeting by the worker and his supervisor.**

FPS-36.3 **Written notification of the child's change in placement shall be provided to the natural parents.**

FP-37 **Termination**

FPS-37.1 **The placement agency shall begin to prepare the foster child and foster family for any change in placement as soon as a decision for placement change is made. Such preparation shall include separate meetings of the worker with the foster child and the foster family to establish:**

a) the reasons for placement change

b) identification of the next placement

c) the purpose of the next placement

d) feelings about change

e) attitudes towards separation

f) a plan for the above

g) a plan for future involvement of foster parents with the child after the move.

A recording of the outcome of the meeting shall be made in the child's and the foster family's file.

Commentary

The intent of the first proposal was to ensure a prompt response to a request for a change in a child's placement by either the child or a foster parent with a view to resolving any difficulties and averting a change. Because of the seriousness of moving the child, the proposal would require that the decision be made in a meeting by the worker and his supervisor. The intent in proposing to require written notification of the child's parents was to recognize the right of the parents at least to be informed of, if not to participate in, the decision to move the child and the desirability of gaining their understanding of the reasons for the move. The third proposal was intended to ensure that conflict or damage to either the foster child or the foster family arising from termination of the placement is minimized through careful planning.

There was general agreement with the first proposal among those who responded. One respondent suggested that "within 5 days of a request" be changed to "as soon as possible within 5 working days".

While most respondents supported the notion of sharing information about the need for re-placement with the child's parents, many foresaw difficulties in implementing the second proposal. Several indicated agreement with the proposed requirement to notify the parents but objected to providing the notification in writing in all cases because they thought formal written notification would be inappropriate in certain situations. Others objected to the requirement for notification in cases where the parents' whereabouts are unknown, where the child is a Crown ward whose parents do not have access to him, where parents have been unavailable or uninvolved in caring for their child or where it has been deemed by a court that continued involvement with his family is not in the child's best interests. One respondent thought that the wording of the proposal could be interpreted to require that the parents be given the name and address of the child's new foster family.

Respondents supported the intent of the third proposal. However, there were some objections that the proposed requirements for separation management were too detailed and that the way in which the process is carried out should be a matter for professional judgement. Concern was also expressed that the requirement for documentation of each meeting appeared excessive. A few respondents stated that in some cases, depending on the age and particular needs of the child, informing him of the planned move as soon as a decision for placement change is made may be undesirable, especially in situations where finding an alternate placement may take some time. Others objected to the requirement for "separate" meetings of the worker with the foster child and the foster family.

All three proposals have been retained as final standards and are grouped under the title "Placement Change". The proposed five-day time limit for meeting with the child and the foster parents has been retained because of the urgency of a request for change from either child or foster parents. To reflect the distinction being drawn between placing agency responsibilities and those of the operator, a final standard numbered FPS-16.1 requires that a decision to move the child be made by an operator worker and his supervisor in conjunction with the placing agency. In response to the concerns about notification of the child's parents, a final standard numbered PAS-12.1 allows for exceptions where the parents' whereabouts are unknown, the parents are unavailable, or they have not been involved with the child either by choice or by court order. How detailed the information should be is left to the discretion of the agency. A requirement for recording the reasons for not informing the parents in the child's file has been added to the final standard.

Much of the detail in the third proposal has been eliminated from the final standard to allow greater professional judgement in preparing the child and the foster parents for the placement change. The final standard simply requires that an operator worker begin to prepare the child and the foster parents for the change as soon as possible after the decision to change the placement is made, to meet with the foster child and the foster family and to record the process whereby they were prepared for the change. Separate meetings are not required and the nature of the preparation for change is not prescribed. The final standard is numbered FPS-16.2.

FP-16 Placement Change

Final Standards

FPS-16.1 An operator worker shall meet with the foster child and the foster parents as soon as possible within five days of a request for a change in placement by the foster parents and/or the child to determine whether a change in placement is needed. A decision to move the child shall be made by the operator worker and his supervisor in conjunction with the placing agency.

FPS-16.2 An operator worker shall begin to prepare the foster child and foster family for any change in placement as soon as possible after the decision for placement change is made. Such preparation shall include at least one meeting of the worker with the foster child and the foster parents before the move is made. A record of the process whereby the child and the foster family were prepared for the placement change shall be made in the child's file.

PAS-12 Placement Change

PLACING AGENCY STANDARD

PAS-12.1 Where a decision is made to change the placement, the placing agency shall inform the child's natural parents unless the parents' whereabouts are unknown, the parents are unavailable or they have not been involved with the child either by choice or by court order. The reason for not informing them shall be recorded in the child's file.

FP-38 Preparation for Discharge

Proposed Standard

FPS-38.1 A proposal for discharge of a child from foster care shall be prepared by the worker and signed by the worker's immediate supervisor, indicating his approval. The proposal shall include:

a) the circumstances or conditions that have changed, resulting in the discharge

b) the manner in which the separation of the child and his foster family will be addressed

c) when the discharge will take place

d) the special needs of the child that must continue to be met after discharge

e) person to whom the child is discharged or the address of the child's new residence where independent living is planned.

Commentary

The intent of this proposal was to ensure that the child's discharge from foster care is carefully thought through and that this important decision is not made in isolation. There was general agreement with the intent of the proposed standard. Concern was raised, however, by the requirement for a separate proposal to be prepared by the worker and signed by the supervisor. One agency agreed with the principle of consultation between worker and supervisor but objected that requiring the supervisor's signature would undermine the worker's professional responsibility. A number of respondents thought that the information that would be required for the proposal for discharge would be included in the child's file and in the quarterly review summary completed by Children's Aid Societies, and a probation and aftercare group noted that the PACO system has a process in place that deals with a change in the status of the ward. These respondents viewed the proposed requirement for separate documentation as time-consuming and redundant. A children's mental health centre, on the other hand, wanted the detailed requirements in the proposed standard increased through the addition of the accompanying guidelines. These suggested consultation with the foster parents, the child and the child's natural parents in preparation for discharge, sensitivity to the time needed for separation by the child and his foster family and increased frequency of the child's visits with his natural parents where the child is to return home.

The proposed standard has been retained in the final standards with minor revisions. The Ministry believes that the decision to discharge or transfer a child from foster care, like the decisions to take a child into care and to place a child in a particular form of care, are so important that they must be documented. In the final standard the "proposal for discharge" has been changed to "a plan for discharge or transfer" which is more definite than a proposal and will cover both outcomes. While the proposed guidelines are good practice, they would not be appropriate or could not be enforced in all cases and thus they have not been added to the final standard. Numbered PAS-14.1, it is a placing agency standard.

PA-14 Preparation for Discharge

PLACING AGENCY STANDARD

PAS-14.1 The decision to discharge or transfer a child from foster care shall be made by a placing agency worker and his supervisor in consultation with the operator. The worker shall prepare a plan for discharge or transfer which shall be recorded in the child's file and signed by the supervisor. The plan shall include:

a) the circumstances or conditions that have changed resulting in the discharge

b) the process by which the separation of the child and his foster family will be addressed

c) the date when the discharge will take place

d) the special needs of the child that must continue to be met after discharge

e) the name, relationship and current address of the person to whom the child will be discharged or the address of the child's new residence where independent living is planned.

FP-39 Transfer of Records

Proposed Standard

FPS-39.1 **The placement agency shall transfer or arrange for the transfer of the child's entire file when the child enters care in a residential facility, or supervision of wardship is assumed by another placement agency.**

Commentary

The intent of this proposal was to ensure that essential information on the child is shared with the facility or agency to which the child is transferred. In general, respondents supported the transfer of essential information in principle but a number of placing agencies raised objections to transfer of the child's entire file and suggested provision of a copy, a summary or selected "relevant" portions only, for several reasons. They argued that:

- Confidential material that may not be relevant to the care of the child should not be shared.
- Subjective comments or unproven but recorded allegations recorded by workers should not be transferred automatically.
- Some material pertains to the placing agency and either has no significance for or is not relevant to the new placement.
- The material is the property of the agency that created the file.

A children's mental health centre questioned transfer of the file without informed consent by the subject. It also requested that the reference to a residential facility be replaced by "another agency". Some probation and aftercare respondents called the proposal inapplicable to the PACO system, since files on wards are centralized and only copies of casework files are forwarded in a transfer of supervision.

In response to these concerns, the final standard has been revised to require that the placing agency transfer not the entire file but "information relevant to the care of the child". The information to be transferred must have been developed or confirmed by the agency. The reference to a residential facility has been retained to make clear that any agency assuming the care of the child must receive information essential to caring for the child. The form in which the information is to be transferred is not specified. The agency is required to obtain the written consent to the transfer of information of a child over 16 years of age or of the natural parents or legal guardian of a child under the age of 16 years. This requirement is consistent with the general provision for disclosure of a child's record in the Child and Family Services Act. The final standard is a placing agency standard numbered PAS-15.1.

PA-15 **Transfer of Records**

PLACING AGENCY STANDARD

PAS-15.1 The placing agency shall transfer or arrange for the transfer of information relevant to the care of the child that the agency has developed or confirmed when the child enters care in a residential facility or supervision of the placement is assumed by another agency. The agency shall obtain the written consent to the transfer of information of:

a) a child 16 years of age or over

b) the natural parents or legal guardian of a child under the age of 16 years.

Proposed Standard

FPS-39.2

When the placement agency moves a child from one foster home to another, the agency shall ensure that the new foster parents are provided with at least the following written information on the foster child:

a) health, medical and dental data

b) description of psychiatric or psychological disturbances, behaviour problems, medical disorders, handicaps, limitations on activity, and allergies

c) school history and academic record

d) a description of the child's interests and any hobbies or extra curricular activities that the child enjoys

e) significant events occurring in foster placement

f) specification of services to be continued to meet the child's needs.

Commentary

This proposal was intended to ensure that foster parents taking over the care of a child who has been transferred from another foster home are fully informed about the child's needs. The proposal was similar to proposed standard FPS-13.2, which required provision of the same information to the original foster parents either before placement or on the actual date of placement. That proposal did not, however, require that the information be written. Respondents expressed several concerns about the provision of such information in writing rather than orally, as has been the general practice with placing agencies. A probation and aftercare group noted that written reports often contain psychological and psychiatric material that requires interpretation by a professional. A Children's Aid Society indicated that foster parents do not wish to keep other than medical information in their homes. A risk of damage to a child if he were to come across the information while in the foster home concerned some respondents, since no controls on the storage or release of the information were proposed. An Association for the Mentally Retarded objected that providing the proposed information in writing was an institutional approach inappropriate for foster care. Respondents generally objected to the additional recording or duplication of information and associated costs the proposal would entail. It was suggested that only one standard stating requirements for information sharing with the foster parents was needed.

It was agreed that a separate standard covering information sharing with foster parents was not necessary and the proposal has therefore been deleted from the final standards. As discussed on pages 79-81, the requirement that the foster parents be provided with health, medical and dental data necessary for the care of a child has been incorporated in final standard FPS-05.1, which covers any placement in a foster home. Final standard FPS-05.1 requires that such health, medical and dental data be provided in writing because of the potential seriousness of lack of information or an error in this area. Final standard FPS-02.2 requires that the worker disclose to the foster parents all information known to the operator about the child that is relevant to the care of the child but does not require that this information be provided in writing.

FP-40 **Aftercare**

Proposed Standards

FPS-40.1 **The placement agency shall ensure that a written aftercare plan is developed prior to the termination of foster care for the child. A statement of the goals of aftercare, the services or casework to be provided and the duration of the plan shall be included. A date for discharge of the child from the care and supervision of the agency shall be projected. A copy of the written plan shall be made available to the natural parents and to the child of 12 years of age or over unless a developmental handicap precludes this.**

FPS-40.2 **The placement agency shall involve the foster parents, the foster child, of 12 years of age or over (unless he is incapable of doing so because of a developmental handicap) and the natural parents, where the foster child is returning home, in developing a plan for continued support to the child and his natural family after discharge. The specific recommendations shall be recorded in the aftercare plan.**

Commentary

The intent of these proposals was to require that the placing agency provide the planning and support needed to ease the separation of the child and the foster parents and to ensure that the benefits and gains made by the child and his natural parents continue after the child leaves care. Most respondents agreed in principle with this intent.

There were objections to the proposed requirement for a separate document with copies to be made available to the natural parents and the child of 12 years of age or older. Preparation and distribution of a separate aftercare plan are not the current practice of most placing agencies. One agency objected that children do not always require service after discharge. Agencies saw this as an additional documentation requirement that could be fairly onerous and perhaps unnecessary, and would carry extra costs. Respondents thought that the requirement for an aftercare plan could and should be incorporated into the existing recording format, thus adding only minimally to the present recording workload. Respondents also suggested dropping the requirement for providing a copy of the aftercare plan to the natural parents and child over 12 years of age and replacing it with a requirement to share the information in the plan with the parents and child. It was also suggested that the plan be shared with the younger child, too. Some respondents expressed concern that it would not be appropriate to provide the plan to the natural parents in all situations, for example where the child is a Crown ward being discharged to adoption or independent living. While it was suggested that a copy of the plan be provided to the foster parents as well, foster parents and others also thought that foster parents do not need in most cases to be involved with the child to a major extent after his discharge from care.

Again, some respondents requested deletion of reference to a developmental handicap from the proposals. An Association for the Mentally Retarded objected to the term "aftercare" as reflecting an institutional or medical model inappropriate for foster care, and suggested "transition" plan instead.

The Ministry continues to regard the proposals as critical standards for ensuring quality service to a child and his family. The proposals have therefore been retained. The Ministry views aftercare as an essential stage in the process of the provision of care and as such the placing agency is required to address the anticipated needs of the child and prepare a plan that indicates how those needs will be met. In some cases provision must be made for the extension of special services to meet the needs of the child or of alternative services to support the natural family and ensure the protection of the child. In other cases follow-up may be minimal and may or may not include contact between the child and his foster parents by phone, letter or visits. In most cases the aftercare plan would require contact of some sort with the worker and/or his foster parents.

The requirement in the first proposal to provide a copy of the aftercare plan to the natural parents and child of 12 years of age or over has been changed to a requirement to share the information in the plan with the parents where appropriate and the child, and reference to the child's age and the exception in the case of a child with a developmental handicap have been deleted. The final standard is a placing agency standard numbered PAS-16.1.

A reference to the operator has been added to the second proposal to recognize the operator's responsibility to provide support to the foster parents where this is needed, and the references to the child's age and a developmental handicap have been deleted. Because of the importance of the foster parents' input for the development of an aftercare plan, reference to involving them in developing the plan has been retained. However, it is agreed that foster parents' involvement in the provision of support to the child after his discharge from foster care will not always be necessary. For that reason, provision of a copy of the aftercare plan to the foster parents will not always be appropriate and is not required by the final standard. The final standard is a placing agency standard numbered PAS-16.2.

PA-16 Aftercare

PLACING AGENCY STANDARDS

PAS-16.1 The placing agency shall ensure that a written aftercare plan is developed prior to the termination of residential care for the child. A statement of the goals of aftercare, the services or casework to be provided and the duration of the plan shall be included. A date for discharge of the child from the care and supervision of the agency shall be projected. This plan shall be shared with the natural parents where appropriate and with the child.

PAS-16.2 The placing agency shall involve the operator, the foster parents, the foster child and the natural parents, where the foster child is returning home, in developing a plan for continued support to the child and his natural family after discharge. The specific recommendations shall be recorded in the aftercare plan.

FP-41 Contents and Maintenance of Foster Child Files

Proposed Standard

FPS-41.1 **The placement agency shall maintain a written case file for each foster child in care and his natural family, including the following:**

a) admission and placement documentation:

- **i) identifying information: full name, sex, birth date, family size, birth order, cultural, racial and linguistic background**
- **ii) assessment study (SEE: FPS-03)**
- **iii) a copy of all court orders regarding custody**
- **iv) name, address, telephone number of natural parents or legal guardian and siblings**

v) name, address and telephone number of person(s) with whom the child was living immediately prior to present placement

vi) medical and dental history: name and address of family doctor and/or hospital used, chronic health problems or conditions, limitations on physical activity or diet, physical handicaps, allergies, drug sensitivities, current medication

vii) medical, health and dental reports: current physical check-up, dental check-up, and visual and hearing tests

viii) school information: name and address of school attended immediately prior to placement, current enrollment information including name of home room teacher, grade, current performance level and copies of all school reports

ix) psychological, psychiatric, educational and other reports pertaining to the functioning and/or care of the foster child

x) a summary of juvenile court findings, where applicable

xi) the name, address and telephone number of placement agency personnel including, where applicable:

- the child's worker and supervisor
- the family worker
- the placement person or person responsible for the support and supervision of the foster home

xii) the name, address and home telephone number of the foster parents and business telephone number for working foster parents

xiii) in the case of a physically or developmentally handicapped child, the name, address and telephone number of any agency, hospital or individual providing support services.

b) recording of care plans or reviews, where applicable:

i) plan of care (SEE: FPS-07.1)

ii) in the case of a physically or developmentally handicapped child, a copy of reports and recommendations made (FPS-30.1) and developmental plans provided (FPS-30.2) by any agency, hospital or individual providing support services

iii) in the case of an emotionally disturbed child, a copy of the individual written management plan (as part of the plan of care) (SEE: FPS-32.1, 32.2)

iv) plans made with the natural parents (SEE: FPS-08.1)

v) foster care reviews (SEE: FPS-35.1)

vi) proposal for discharge (SEE: FPS-38.1)

vii) aftercare plan (SEE: FPS-40.1)

c) recording of significant events.

Commentary

The consultation paper stressed the importance of documenting in detail information on the history of the child and his family background that is essential to his care and of recording his movement through the foster care process from admission to termination and aftercare. The intent of the proposal above was to list the minimum information that must be collected and retained for a child in foster care. The paper stated that the proposal summarized information requirements outlined in other proposed standards, and placing agencies were likely to find that most of the information required was already being collected by their workers. Also, the information catalogued in the proposal was consistent with but less detailed than the recommendations in the Recording Manual for Services to Families and Child Care compiled in 1982 by the Ontario Association of Children's Aid Societies and the Ministry.

There was general agreement with the proposed requirement to retain a record on the child in care and with the majority of the specific items to be included. Most respondents agreed that the proposal listed the minimum information that must be collected and maintained for a child in foster care, although a few foresaw additional requirements for worker time and related costs. There was a suggestion that implementation should be assisted by the provision of new Ministry forms. There were also some concerns about the applicability of the standard and some suggestions for changes, deletions and additions.

A large Children's Aid Society stated that it maintained the information in three separate files, the child, the foster family and the medical file, and that implementation of the proposed standard would require a total revision of its recording system. A probation and aftercare group commented that the probation and aftercare manual outlines file maintenance procedures to be followed. Their response stated that the probation and aftercare system has no legal jurisdiction over the family of a probationer and thus has no mandate to retain the child's medical records.

In section (a), it was suggested that religion be added to subsection (i). Subsection (iii) drew both the comment that "a copy of all court orders regarding custody" would involve unnecessary duplication and expenditure and the suggestion that this proposed requirement be changed to "a record of all court orders". Addition of the child's immunization history and changing "limitations on diet" to "special dietary feeding arrangements" were suggested for subsection (vi). The availability to the agency of the school records mentioned in subsection (viii) was questioned, and there was a suggestion as well that the name of the child's school principal be added to the subsection. With respect to subsection (ix), it was noted that not all children will have medical and psychological needs and reports. A number of respondents commented that it was not necessary or desirable to include the address and telephone number of the workers in the child's file.

The Ministry believes that the recording in the child's file as well as reports and relevant documentation should be contained in one file. In this way relevant information is easily accessible to the worker for purposes of court, placement or discharge planning or plan of care development or reviews. It is not intended that this approach preclude the existence of other files (court, medical, psychological, etc.) or working case notes relevant to the child which are kept in other locations. If it is the agency's practice to maintain fuller service specific files in a location other than the child's file, then summaries or updated reports will have to be provided to the child's worker on a periodic basis as new information is collected for inclusion in the child's file.

In developing the final standard, an effort has been made as with other proposals, to avoid imposing an inappropriate level of detail. The final standard which focusses on the operator's record-keeping responsibilities towards the child, has been considerably reduced and simply lists the main categories of information to be collected and retained. It should be noted that these categories are consistent with those set out in final standard FPS-02.1, which lists the information the operator must obtain from the placing agency when accepting a child for foster care. That information includes the child's religious background and immunization record. It is expected that the operator will place in the child's file any medical, dental, psychological or psychiatric reports where these exist and are made available to the operator as a result of carrying out the medical responsibilities specified in final standard FPS-10.1, and any school reports that are provided to the operator by the placing agency as set out in final standard FPS-02.1 or acquired by the operator in carrying out its foster care plan responsibilities as set out in final standard FPS-01.1. There is no expectation that the operator seek records that are commonly held by the school itself. In section (c), "significant events" has been changed to "serious occurrences reported by the foster parents or other persons or agencies involved with the care of the child", to be consistent with final standard SDMS-14.1, which specifies occurrences to be reported by foster parents to the operator, and to incorporate in the final standard a recording requirement originally proposed as a separate standard. The final standard is numbered SDMS-19.1, and the heading has been changed to "Contents of Foster Child Files".

SDM-19 Contents of Foster Child Files

Final Standard

SDMS-19.1

The operator shall maintain a written case file for each foster child in care, including the following:

a) admission and placement documentation:

  i) identifying information and family background information (SEE: PAS-03.1)

  ii) the assessment report (SEE: PAS-03.1)

  iii) a record of all court orders and a summary of juvenile court findings, where applicable

  iv) health care, medical and dental history and reports (SEE: PAS-08.1)

  v) school information (SEE: FPS-02.1) including copies of all school reports

b) recording of care plans and reviews, where applicable:

  i) the foster care plan (SEE: PAS-06.1 and PAS-06.2)

  ii) psychological, psychiatric, educational and other reports pertaining to the functioning and/or care of the foster child

  iii) in the case of a developmentally, physically or learning-handicapped or emotionally disturbed child, a copy of evaluations made and plans provided by any professional, school, clinic or hospital service (SEE: FPS-01.1)

  iv) plans made with the natural parents (SEE: PAS-06.2)

  v) foster care plan and placement reviews (SEE: FPS-07.1 and PAS-11.1)

c) recording of any serious occurrences reported by the foster parents (SEE: SDMS-14.1) or other persons or agencies involved with the care of the child, including a description of the incident, who reported it, the date and the time.

FPS-42 Reporting of Serious Occurrences

Proposed Standard

FPS-42.1 **The placement agency shall inform the foster parents in writing of the serious occurrences involving the foster child that shall be reported immediately to the agency. Emergency telephone numbers shall be provided to the foster parents to call to report serious occurrences taking place after office hours. The serious occurrences that shall be reported include:**

a) the death of the child

b) serious injury to the child

c) commission of a juvenile offence

d) abuse or mistreatment of the child

e) apprehension by police

f) alcohol or drug abuse

g) fire or other disasters in the home

h) absences of the child without permission from the foster home.

Commentary

The proposed requirements for the reporting by the foster parents to the agency of serious occurrences involving the foster child were intended to protect the child and recognize the responsibility of the agency for the child's well-being. Respondents expressed general agreement with and support for the proposal. There were a few suggestions for changes, additions and deletions. There were suggestions that (b) be expanded to include serious illness and hospitalization as well as serious injury; one respondent asked for a definition of serious illness and serious injury. It was suggested that (c) be changed to read "charge" rather than "commission" of a juvenile offence. There were suggestions for the addition of "prolonged or habitual absence from school", an offence under the Education Act and of "any other serious events deemed serious by the foster parent". One agency commented that the proposed requirements were not consistent with the Ministry Guidelines and Procedures for the Reporting and Follow-up of Serious Occurrences and expressed concern about a "need to recognize and to report suicide attempts". There were suggestions also that the standard specify a time period for reporting serious occurrences. While some foster parents and agency workers thought that alcohol or drug abuse should be reported to the worker as soon as possible, one agency thought that some discretion should be allowed in the reporting of such abuse and of absences without permission from the foster home.

Revisions made in the final standard reflect some of these comments. Section (b) incorporates the requested references to serious illness and hospitalization. Defining and specifying serious illnesses and injuries are matters that are left to the operator's judgement; the Ministry's serious occurrences guidelines likewise allow agency directors some discretion in determining what constitutes a serious occurrence. In section (c), "commission" has been changed to "charge". A new section (i) including "any other serious occurrence concerning the child" has been added to accommodate those occurrences which agencies believe to be of a serious nature. The requirements for reporting alcohol and drug abuse and absences without permission have been retained because these are all also indicators of problems of the child that need prompt attention. The requirement for immediate reporting of the serious occurrences listed has been retained because of the importance of quick follow-up by the operator and, as appropriate, the placing agency. The final standard is numbered SDMS-14.1.

Two standards outlining the operator's responsibilities to report serious occurrences involving a foster child in care to the placing agency where this is a separate organization and to the Ministry have been added. These are numbered SDMS-14.2 and SDMS-14.3.

SDM-14 Reporting of Serious Occurrences

Final Standards

SDMS-14.1

The operator shall inform the foster parents in writing of the serious occurrences involving the foster child that the foster parents shall report immediately to the operator. The operator shall provide emergency telephone numbers to the foster parents to call to report serious occurrences taking place after office hours. The serious occurrences that shall be reported include:

a) the death of the child

b) serious illness, serious injury or hospitalization of the child

c) a charge under the Young Offenders Act

d) abuse or mistreatment of the child

e) apprehension by police

f) alcohol or drug abuse

g) fire or other disasters in the home

h) absences of the child without permission from the home

i) any other serious occurrence pertaining to the child.

SDMS-14.2 The operator shall report within 24 hours to the placing agency:

a) the death of the child

b) serious illness, serious injury or hospitalization of the child

c) abuse or mistreatment of the child

d) fire or any other serious occurrence concerning the child.

SDMS-14.3 The operator shall report within 24 hours to the Director:

a) the death of the child

b) serious illness, serious injury or hospitalization of the child

c) abuse or mistreatment of the child.

Proposed Standard

FPS-42.2 The placement agency shall record in the foster child's case file any serious occurrence reported by the foster parents or persons or agencies involved with the care of the child. The recording shall include a descripton of the incident, who reported it, the date and time.

Commentary

There was general agreement with this proposed requirement. It has been incorporated in final standard SDMS-19.1, which specifies the contents of the case file the operator is to maintain for each foster child in care.

Proposed Standard

FPS-42.3 The placement agency shall inform the natural parents and legal guardian in person within 24 hours or on the next working day after the serious injury or death of a child in foster care. The director shall designate a person to perform this function.

Commentary

The intent of this proposal was to ensure that natural parents are informed as quickly as possible about serious injury to or the death of their child in foster care. There was general agreement with this intention. The proposed timing was questioned. Suggestions were made to change the timing to "immediate" or to add "as soon as possible" before "within 24 hours" and to delete "or on the next working day after", since that could mean a three or four-day wait on a holiday weekend. While respondents agreed that personal contact with the parents by an agency representative or person designated by the agency is preferable, it was suggested that contact by telephone or telegram be allowed where the parents are in another distant location or province, as this would be quicker. The proposed requirement that the agency director designate a person to inform the parents drew two different requests that it be deleted. One agency objected that such a requirement would be an intrusion into agency practice and decision making. An agency with a large catchment area held that supervisors and workers should be allowed to designate the person to perform this function, particularly where parents reside out of the immediate area.

The final standard requires that the placing agency inform the child's natural parents or legal guardian of the specified occurrences "within 24 hours or as soon as possible thereafter", instead of "or on the next working day". The expectation remains that the placing agency will inform the natural parents as soon as possible but it would not be realistic to require "immediate" notification where the placing agency and the operator are two separate organizations. Serious illness and hospitalization of the child have been added to the final standard for consistency with other reporting standards. The requirement that the agency director designate a person to inform the parents has been deleted, allowing the agency the discretion to handle this task as it wishes. The final standard is a placing agency standard numbered PAS-13.1.

PA-13 Informing Natural Parents of Serious Occurrences

PLACING AGENCY STANDARD

PAS-13.1 The placing agency shall inform the natural parents or legal guardian of a child in care within 24 hours or as soon as possible thereafter of:

a) the death of the child

b) serious illness, serious injury or hospitalization of the child.

Wherever possible, the placing agency shall inform the natural parents in person of the serious illness, serious injury, hospitalization or death of a child in care.

FP-43 Confidentiality

Proposed Standard

FPS-43.1 **The placement agency shall keep all case records on the placement agency's premises and in a locked file. Information in case files shall be available only to:**

a) authorized persons within the placement agency

b) the child's foster parents when they have signed a statement of confidentiality

c) other agencies, professionals or hospitals when authorization has been given following a proper request for information.

Commentary

This proposal was intended to ensure that sensitive personal information is kept in a secure setting and made available only to people who have a legitimate reason for obtaining access to it. Respondents generally agreed with the need for security and most agreed that the people listed in the proposal were entitled to information in case files. Some agencies reported that they either had in place or were in the process of developing an agreement with foster parents covering such information and including a confidentiality declaration or clause. Some agencies indicated concern both on their part and on the part of foster parents about the appropriateness of foster parents having direct access to case files as opposed to information from the files, particularly in view of the possibility that sensitive information about other members of a foster child's family might be included in his file. There was as well concern among foster parents that it was inappropriate for them to see confidential information about other foster parents that might be contained in the child's file. One agency commented that the proposal implied that foster parents as a matter of right have access to all case records. There were suggestions that foster parents be given access only to "relevant" information in case files and at the agency's discretion. It was also suggested that the standard should provide for access by the foster child to his own information and for the consent of the child of 12 years of age or older to access to it by other people. A few respondents requested clarification of what guidelines would be used and what authorization would be issued, as well as definitions of "premises" and "proper request for information".

Two separate final standards have been created from the original proposal in recognition that physical security of confidential information and access to it are different records management issues. These standards will appear under the new heading "Confidentiality of and Access to Information" among the standards for selection, development and management of foster homes, where they are more appropriately placed. The standards are both specific to foster care records.

A final standard numbered SDMS-21.1 requires that the operator keep all foster care records on the operator's premises and in a locked container. This means that the records must be kept on the premises where the management functions for the foster care service are carried out. "Container" has been substituted for "file" for consistency with the standards for children's residential care facilities and with those for day nurseries.

A final standard numbered SDMS-21.2 names the parties to whom "information held by the operator on a foster child", rather than "information in case files" as in the proposal, may be made available and in what circumstances. In addition to those originally listed, the parties named include the child of 12 years of age or older and his parents or legal guardian. "Proper request for information" has been replaced by "written consent to release of the information by the child of 16 years of age or older or the parents or legal guardian of a child under 16 years of age". As noted in the discussion of consent to transfer of records, this is consistent with the consent and age requirements proposed under the Child and Family Services Act. The definition of an "authorized" person is left to the judgement of the operator. The final standard contains a cross-reference to a statement of confidentiality that will be required by another standard.

SDM-21 Confidentiality of and Access to Information

Final Standards

SDMS-21.1 The operator shall keep all foster care records on the operator's premises and in a locked container.

SDMS-21.2 Information held by the operator on a foster child shall be available only to:

a) the child of 12 years of age or older

b) the legal guardian of the child

c) authorized persons in the employ of the operator

d) the child's foster parents when they have signed a statement of confidentiality (SEE: SDMS-07.1)

e) other agencies, professionals or hospitals when authorization has been given following written consent to release of the information by the child of 16 years of age or older or the legal guardian of a child under 16 years of age.

FP-44 Review of Records

Proposed Standard

FPS-44.1 **The supervisor shall examine the foster child's case file at the time of foster care review (SEE: FPS-35.1) to ensure that the required recording and documentation have been carried out. The supervisor shall sign and date the record at the time of the review.**

Commentary

There was general agreement with the requirements advanced in this proposal. The majority of the Children's Aid Societies responding indicated that review and signing of the child's file would be carried out regularly together with the quarterly summaries. Some Probation and Aftercare Offices noted that all PACO files are reviewed semi-annually under a case audit system. One PACO group objected to changing the system just for children in foster care.

The proposal has been incorporated in final standard FPS-07.1, which requires review of the foster care plan at least every three months. As noted in the discussion of that standard, the requirement that the supervisor examine the child's file and sign the record of the review is intended to ensure not only that the documentation is complete but also that the worker reviewing the plan does not make changes in the plan in isolation.

7. FOSTER CARE PRACTICES: THE FOSTER HOME

Selection, Development and Management of Foster Homes

This section of the consultation paper focussed on the desired characteristics and skills of foster parents, agency responsibilities and concerns in selecting foster homes and the supports foster parents need to foster a child successfully. The section proposed standards and guidelines for:

- the selection process
- orientation of foster parents
- the service agreement between the agency and the foster parents
- support services for foster parents
- evaluation of foster care
- handling complaints and grievances
- maintaining foster family files.

The discussion of these proposals, like the discussion of the foster care process proposals, deals primarily with the response to the proposed standards and the revisions made in the final standards. Again, the numbers of many final standards differ from those of the original proposals. As explained in chapter 3, selection, development and management of foster homes and helping children in those homes will be responsibilities of the operator.

The Standards for Selection, Development and Management of Foster Homes

As discussed in chapter 3, the proposed standards were intended to establish a comprehensive framework for the operation and management of foster care services. The continuum of care that was originally proposed as a central part of such a management framework has been dropped to allow each operator the flexibility to choose its own system for the selection, development and management of foster homes. A final standard numbered SDMS-01.1, titled Classification of Foster Homes, simply outlines basic requirements a system must have for the selection, development and management of foster homes, leaving the details to the operator. The final standard includes provisions covering classification of foster homes, recruitment and screening of foster parents and supervision and evaluation of foster homes previously proposed in separate standards.

SDM-01 Classification of Foster Homes

Final Standard

SDMS-01.1

As part of its system for the selection, development and management of foster homes, the operator shall:

a) have a written system for the classification and utilization of its foster homes

b) establish written procedures for the recruitment, screening and selection of foster parents

c) keep up to date a list of approved foster homes

d) supervise its foster homes

e) evaluate its foster homes annually according to the objectives set for the type and level of care to be provided in the home.

SDM-01 Recruitment

Proposed Standard

SDMS-01.1 **The placement agency shall have a written plan for the recruitment of foster family homes.**

Commentary

This proposal was intended to ensure that a sufficient number and variety of foster homes are available for children requiring care. Most respondents agreed with the intent of the proposal. However, a few respondents saw a written plan as requiring additional staff time, some private operators thought that the proposal was not relevant to their services and one Children's Aid Society suggested that there is not always a constant and continuing need for recruitment in all parts of the province. Other respondents suggested that the standard be made flexible to allow for a need to change recruitment strategies from year to year in response to local requirements.

To simplify and make the recruitment for operators more flexible, this proposal has been deleted from the final standards and a requirement that the operator establish a procedure for recruitment has been incorporated in final standard SDMS-01.1, which outlines the basic elements of the required system for the classification, development and management of foster homes.

SDM-02 Preliminary Screening of Foster Applicants

Proposed Standard

SDMS-02.1 **The placement agency shall obtain the following information from any interested adult inquiring about becoming a foster parent:**

a) full name

b) home address

c) home telephone number

d) business telephone number

e) how the applicant learned about the need for foster parents.

A file shall be opened on every applicant and shall include this information. Any adult interested in fostering shall receive written information regarding fostering and agency policy as soon as possible after the inquiry.

Commentary

The term "preliminary screening" was used to refer to agency practices in responding to an initial inquiry from potential foster parents. During the preliminary screening, it is possible to determine their eligibility to become foster parents, avoiding unnecessary expenditure of time or emotional involvement for both the agency and those inquiring.

Most respondents agreed with the proposal. However, several placing agencies suggested that a distinction be made between an inquiry and an application. They held that when inquiring about foster care, a caller should feel free to ask any questions he or she wishes without being required to give identifying information. Several placing agencies suggested that a record of all inquiries will contain enough information to identify individual callers. Most placing agencies indicated that an individual file is generally not opened until the decision has been made to proceed with a home study. Respondents also raised a number of concerns about the appropriateness of sending out statements of agency policy to inquirers. Some indicated that their practice is to discuss agency policies in orientation sessions. Later, these may be made available to foster parents in a manual.

To simplify and make the screening requirements more flexible, the proposal has been deleted from the final standards and a requirement that the operator establish a procedure for screening has been incorporated in final standard SDMS-01.1.

SDM-03 Foster Home Study

Proposed Standard

SDMS-03.1 **A placement agency worker shall complete a foster home study through the use of planned interview(s). A minimum of one interview shall be held in the applicants' home. In a two-parent home, both parents shall be seen and interviewed. Children of the applicants shall be seen and shall participate when their age and functioning allow.**

Commentary

This proposed standard was intended to ensure that applicants to be foster parents and their home meet the conditions necessary for the care and development of a child and thus to protect the child from harmful experiences, including unnecessary re-placement. The commentary on this proposal stated that a home study should be seen as an exchange of information between the applicants and the agency. The information exchange enables the agency to determine whether the applicants can be successful foster parents, and the applicants to make a considered decision about becoming foster parents.

Most respondents agreed with the proposal. Some of the individuals and placing agencies responding to it suggested that the commentary overemphasized the exchange of information in the home study process and did not stress sufficiently that the home study was an assessment of the applicants' ability to provide care for a foster child. Some respondents suggested additions to the proposal. It was suggested that the phrase "both jointly and separately" be added to the requirement to interview both parents to enable the worker to establish that each parent is committed to becoming a foster parent. It was also suggested that any other person living with the foster family be interviewed as part of the home study.

The final standard has been given the new heading "Approval of Foster Homes" and specifies the conditions that must be fulfilled before the operator approves an applicant for fostering. Section (a) of the final standard requires that at least one planned interview be conducted in the applicants' home, including both joint and separate interviews with each parent in a two-parent home. Section (b) contains a requirement to meet other members of the family and other persons living in the home. Two sections have been added that deal with references and the health of the applicants and their family, previously proposed as separate standards. The final standard is numbered SDMS-02.1.

SDM-02 Approval of Foster Homes

Final Standard

SDMS-02.1 The operator shall approve a home for fostering only after:

a) conducting both joint and separate interviews with each parent in a two-parent home and a minimum of one planned interview held in the applicants' home

b) meeting other members of the family and other persons living in the home

c) requesting the applicants to provide the names of at least three persons in the community who can provide references for the family, contacting these persons by letter and/or telephone and making a record of their comments regarding the suitability of the applicants for fostering

d) obtaining a written statement from a licensed physician or an individual approved by the local medical officer of health regarding the general health and specific illnesses or disabilities of foster parent applicants and family members that might interfere with fostering.

SDM-04 References

Proposed Standard

SDMS-04.1 **The placement agency worker shall request the applicants to provide the names of persons in the community who can provide references for the family. These persons shall be contacted by letter and/or telephone prior to the placement of any foster child. A record of their comments regarding the suitability of the applicants for fostering shall be kept in the applicants' file.**

Commentary

There was general agreement with this proposed requirement and most placing agencies responding indicated that it reflected their current practice. There were suggestions that references be contacted prior to the approval of the home rather than prior to the placement of any foster child. Some respondents expressed concern about the proposal to include comments about the applicants' suitability for fostering in the applicants' file, noting that references are normally given in confidence.

The suggestions that references be obtained prior to approval of a foster home are reflected in final standard SDMS-02.1 which requires that these be obtained before the operator approves the home. The proposed requirement that comments regarding the applicants' suitability for fostering be kept in the applicants' file has been deleted from the final standards.

SDM-05 Family Health

Proposed Standard

SDMS-05.1 **The placement agency shall obtain a written statement from a licensed physician or an individual approved by the local medical officer of health regarding the general health, specific illnesses or disabilities of foster parent applicants and family members that might interfere with fostering, and a record of tuberculin examinations and immunizations against communicable diseases.**

Commentary

The intent of this proposal was to ensure that all foster parents and members of their families are healthy and do not present health hazards to foster children. There was general support for the intent of the proposal. Many respondents indicated that requiring a record of tuberculin examinations and immunizations against communicable diseases is not current practice. Such examinations and immunizations are not mandatory and may not be available to residents of remote communities in some areas. The question was also raised as to who would bear the costs of these provisions, especially the requirement for a medical statement from a third party, as OHIP does not pay for such assessments when requested by third parties.

The requirement for a written statement regarding the health of foster parent applicants and family members has been retained and incorporated in final standard SDMS-02.1 because of the importance of ensuring the health of foster children. The proposed requirement for a record of tuberculin examinations and immunizations against communicable diseases has been deleted from the final standards.

SDM-06 **Physical Requirements**

Proposed Standard

SDMS-06.1 **Every placement agency shall ensure that any worker involved in the selection and approval of foster homes has a written copy of:**

a) laws or regulations pertaining to the health of inhabitants of the municipality in which the building is located as determined by the local medical officer of health

b) any by-law of the municipality in which the building is located or other law for the protection of persons from fire hazards as determined by the local fire authority

c) any restricted area, standard of housing, occupancy or building by-law passed by the municipality pursuant to Part II of The Planning Act, R.S.O. 1970, 349, as amended, as determined by the council of the municipality in which the building is located.

Commentary

The proposed housing requirements focussed on the elements of the space and structure of a home that are essential to safety and amenable to regulation. The proposals relied where possible on the standard setting and enforcement responsibilities of local and other authorities with jurisdiction in health, fire safety and building construction. The intention was to respect the existing diversity of construction and of community standards, while establishing minimum province-wide standards for children living outside of their own homes. The proposal above would simply require that workers involved in the selection and approval of foster homes be given copies of all relevant by-laws in the placing agency's jurisdiction. The commentary indicated that the proposal was intended to ensure that the placing agency is familiar with any municipal by-laws and regulations restricting use of private homes for foster care, since a foster home must comply with the building, health, fire or other codes in effect in the jurisdiction where it is located.

Although a number of placing agencies both urban and rural endorsed the proposal, it drew strong objections from the majority of Children's Aid Societies responding. Those objecting indicated that it was not current practice and would be difficult to implement given the numbers of municipalities served by most agencies and the great variation in local by-laws. It appeared that many of those objecting thought that the proposal expected social workers to have or develop expertise in the specialized areas listed and viewed this as an inappropriate assignment of responsibility and one with significant implications for staff time.

While the Ministry continues to believe that operators of foster homes should be familar with by-laws affecting their service, it has concluded as indicated in chapter 3 that it is desirable to simplify the worker's task in determining whether a home is acceptable to provide foster care. Also, local authorities can be expected to carry out their specialized responsibilities for housing safety and construction. The proposal above has therefore been deleted from the final standards.

Proposed Standard

SDMS-06.2 **The placement agency worker shall visit the applicants' home to ensure that it is maintained in a condition free of hazards to health and physical safety. The worker shall see common living areas of the applicants' home, the proposed sleeping area of a foster child, the grounds surrounding the house, and play space used by children on the premises or recreational areas within walking distance. A record of the visit and a statement regarding compliance with the physical and/or structural requirements prescribed in the regulations shall be made in the applicants' file.**

Commentary

The intent of this proposal was to ensure that the home of potential foster parents is maintained in a safe condition, free of hazards to health and physical safety. Most placing agencies responding supported the standard, although some objected to a proposed requirement that workers be expected to assess the structural soundness of housing or determine compliance with physical or structural requirements prescribed in regulations. Respondents also expressed concerns that an otherwise suitable home might not be able to meet stringent standards or, conversely, that community norms may sometimes conflict with some physical requirements.

The final standard has been revised to simplify the worker's task in inspecting the prospective foster home. The worker is required to make a record of the visit in the applicants' file but not to assess compliance with the physical or structural requirements prescribed in municipal by-laws. As discussed in chapter 3, operators of foster homes may apply for exemption from the housing requirements for categories of foster homes or for individual foster homes. The final standard is numbered SDMS-03.1 and titled "Housing Requirements".

SDM-03 Housing Requirements

Final Standards

SDMS-03.1 An operator worker shall visit the applicants' home to determine that it is suitable for placement of a foster child. The worker shall see common living areas of the applicants' home, the proposed sleeping area of a foster child, the grounds surrounding the house and play space used by children on the premises or recreational areas within walking distance. A record of the visit shall be made in the applicants' file.

SDM-07 Interior

Proposed Standards

SDMS-07.1 **The placement agency shall ensure that any home approved for foster children has specifically designated spaces for informal living, dining, food preparation and storage, and separate rooms for sleeping and bathing.**

SDMS-07.2 **A home approved by the placement agency for foster children shall be equipped with a means of providing and maintaining a supply of heat to habitable rooms.**

SDMS-07.3 **A home approved by the placement agency for foster children shall be maintained in a sanitary condition. Garbage, refuse and other wastes shall be disposed of in such a way as not to constitute a health hazard.**

Commentary

The consultation paper noted that foster homes are private residences that vary in size, rooms and furnishings, depending on the needs of the family, community norms and the geography and climate of the area. It is neither possible nor desirable to set rigorous standards for the homes or furnishings. The intent of the proposals above was to ensure the security, privacy and suitability of accommodation for foster children.

There was general agreement with the requirements of the three proposals. However, some placing agencies in the north expressed concern that the requirement in proposed standard SDMS-07.1 for separate rooms for sleeping and bathing conflicted with norms in native communities, and was impractical and unrealistic for rural settings where accommodation standards differ from those in urban areas. In addition, there was a request for clarification as to whether homes using wood-burning stoves would comply with proposed standard SDMS-07.2.

These proposals have been combined as final standard SDMS-03.2, which specifies basic housing requirements for foster homes. To determine that the home is suitable for placement of a foster child, the worker is required to determine that the home has specifically designated spaces for certain daily living activities and separate rooms for sleeping and bathing, is equipped with a source of heating and is maintained in a safe and sanitary manner. As previously indicated, operators may seek exemptions from the requirements in the final standard where these conflict with community norms. It should be noted that a central heating system is not required and wood-burning stoves would comply with the standard.

SDM-03 **Housing Requirements**

Final Standard

SDMS-03.2 The worker shall determine that the home:

a) has specifically designated spaces for informal living, dining, food preparation and storage, and separate rooms for sleeping and bathing

b) is equipped with a means of providing and maintaining a supply of heat to habitable rooms

c) is in a condition free of hazards to physical safety, and garbage, refuse and other wastes are disposed of in such a way as not to constitute a health hazard.

SDM-08 **Sleeping Accommodation**

Proposed Standard

SDMS-08.1 **The placement agency shall ensure that the sleeping accommodation for foster children meets the following minimum specifications:**

a) No child under 12 years shall sleep in a room higher than the second floor without provision for direct access to the ground.

b) No rooms without windows shall be used as bedrooms.

c) No foster child shall sleep in a detached building, unfinished attic or unfinished basement, a stairway hall or room commonly used for other than bedroom purposes.

d) Each foster child, shall have his own bed appropriate to his age, a clean mattress and bedding appropriate for weather and climate.

e) Foster children shall not share the sleeping room of any adult, unless the needs of an infant or illness of a child require this arrangement.

f) No child over 6 years of age shall share a bedroom with another child of the opposite sex except in the case of siblings.

Commentary

Most placing agencies responding to this proposal supported the principle of minimum requirements for sleeping accommodation for foster children. Some respondents, however, raised concerns about the specific wording of various sections of the proposal.

It was suggested that the first sentence should refer to the "regular sleeping accommodation for foster children". This would allow for flexibility of arrangements during foster family vacations and visits by other people to the foster home.

Responses to section (a) suggested that it did not allow for the possibility of foster care in an apartment or townhouse. Also, clarification was requested as to what constituted "direct access to the ground". If this meant a fire escape, respondents thought it an inappropriate requirement for a private home and one that would preclude the possibility of placing children under the age of 12 in the third storey of a house without a fire escape.

Most responses supported section (b). It was suggested, however, that this requirement would prevent the use of otherwise suitable finished basements and the section should be a guideline.

Section (c) drew an objection that it was too specific. It was suggested that barring any "room commonly used for other than bedroom purposes" would eliminate many native homes from use for foster care and thus this phrase should be deleted. It was also suggested that a finished room in an unfinished basement would be acceptable accommodation.

Concerns were expressed that section (d) would exclude certain placements in native communities where children often share a bed. It was also suggested that it would preclude sharing by non-native children who require the security of sleeping with a sibling or other child especially when first entering foster care. Placing two siblings in a double bed was seen as preferable to the alternative of placing them in separate foster homes. A number of respondents indicated that a separate bed for each child may be desirable in most cases but they did not consider it essential particularly for young siblings.

Section (e) was seen as too restrictive for both foster homes in general and native communities in particular. Respondents indicated a need for clarification of the term "adult" since they interpreted the proposal to mean that a 16-year-old foster child would not be permitted to share a room with an 18-year-old of the same sex. They indicated that the concern here should be that foster children not share the sleeping room of any adult couple or any adult of the opposite sex unless the needs of an infant or the illness of a child should require this arrangement. One agency objected that (e) was not practical for the north. Another recommended that sections (e) and (f) not apply in the case of a developmentally handicapped child.

Most of the concerns expressed about section (f) centred on two different points. One was that the proposal was not appropriate for native homes. The other was that, given increased knowledge of the incidence of incest, an exception should not be made for siblings over the age of six.

The final standard incorporates some revisions that reflect respondents' concerns. The word "regular" was added to sleeping accommodations to allow for the necessary flexibility of arrangements in certain situations. The operator is required to ensure that the regular sleeping accommodation for foster children meets the minimum specifications listed in the standard unless otherwise approved by the Ministry. Thus operators may seek Ministry approval for arrangements that are consistent with community norms although they do not meet the conditions specified in the standard. Section (a) has been deleted from the standard because it appeared to preclude foster care in apartments or townhouses and suggested that fire escapes were required. The reference in section (c) to a room commonly used for other than bedroom purposes has also been deleted. The final standard requires that the child have a bed appropriate to his age but not a bed of his own thus allowing for sharing of a double bed. It precludes sharing of a bed or sleeping accommodation by a foster child and adult couple or an adult of the opposite sex but not an adult of the same sex except in specified circumstances. The final standard bars sharing of a bedroom by any foster children of the opposite sex who are over the age of six. The final standard is numbered SDMS-03.3.

SDMS-03 Housing Requirements

Final Standard

SDMS-03.3 The operator shall ensure that the regular sleeping accommodation for foster children meets the following minimum specifications unless otherwise approved by the Director:

a) No rooms without windows shall be used as bedrooms.

b) No foster child shall sleep in a building detached from the foster home, an unfinished attic, unfinished basement or a stairway hall.

c) Each foster child shall have a bed appropriate to his age, a clean mattress and bedding appropriate for the weather and climate.

d) No foster child shall share a bed or sleeping room of any adult couple or adult of the opposite sex unless the needs of an infant or illness of a child require this arrangement.

e) No foster child over six years of age shall share a bedroom with another child of the opposite sex.

SDM-09 Emergency Fire Safety and Health Protection

Proposed Standards

SDMS-09.1 The placement agency shall ensure that there is a means of communicating regularly and routinely with persons approved for fostering. Every foster home shall have a telephone or access to a telephone except where telephone service is not available to the community.

SDMS-09.2 The placement agency shall inform the applicant for fostering that agency policy regarding weapons is that all weapons including firearms, air rifles, bows and hunting sling shots shall be made inoperable and inaccessible to children when not in use.

SDMS-09.3 The placement agency shall ensure that any home that is approved for foster care has a single station smoke detector and alarm device between bedrooms and the remainder of the home approved by Underwriters' Laboratories of Canada.

SDMS-09.4 **The placement agency shall ensure before a foster child is placed that the foster home has a procedure for evacuating the home in case of fire, assuring each foster child a single acceptable exit. All foster children shall know what exit to use and how to use it in case of fire.**

Commentary

These proposals were intended to ensure the safety of the foster child while living in the foster home.

There was general support for proposed standard SDMS-09.1. One northern Children's Aid Society was pleased that it accommodated rural homes without telephones, while one society serving a largely rural area considered a telephone a must.

There was general agreement with the need to protect foster children from weapons that may be kept in the foster homes, as proposed in SDMS-09.2. Some respondents suggested that "inaccessible" needed to be defined. There were suggestions that firearms should be equipped with trigger locks, and questions as to whether the Ministry would pay for the locks; also that ammunition and firearms should be locked up separately.

There was general agreement with proposed standard SDMS-09.3. However, there were requests for clarification as to whether "single station smoke detector and alarm device" required the purchase of one or two separate appliances. In addition, concern was expressed that wood burning stoves and fireplaces interfere with the operation of smoke detectors. Some respondents objected that the placement of the devices should be determined by the local fire department. Again, some agencies saw the requirement as carrying costs, and asked whether the Ministry would pay for the devices.

There was general agreement with proposed standard SDMS-09.4. Some respondents, however, found the references to the exit to be used by each child unclear and possibly contradictory.

These proposals have been combined in a single final standard numbered SDMS-04.1 that reflects respondents' comments. Section (b) of the final standard, which deals with firearm safety, leaves to the operator the decisions as to how firearms and ammunition should be stored, and requires that the operator so inform people approved for fostering, rather than applicants for fostering. Section (c), which contains the smoke detector provision has been reworded to require a "single station smoke detector with alarm device" to clarify that one appliance is intended. Section (d), which requires a fire evacuation procedure for the foster home, has been revised to specify that the foster parents are to inform each foster child of the exit to use and how to use it in case of fire.

SDM-04 Emergency, Fire, Safety and Health Protection

Final Standard

SDMS-04.1 To protect the safety of foster children, the operator shall:

a) ensure that there is a means of communicating regularly and routinely with persons approved for fostering and every foster home has a telephone or access to a telephone except where telephone service is not available to the community

b) inform persons approved for fostering that agency policy regarding weapons is that all weapons including firearms, air rifles, bows and hunting sling shots shall be made inoperable and inaccessible to children when not in use

c) ensure that any home that is approved for foster care has a single station smoke detector with alarm device between bedrooms and the remainder of the home approved by Underwriters' Laboratories of Canada

d) ensure before a foster child is placed that the foster parents have a procedure for evacuating the home in case of fire. The foster parents shall inform each foster child of the exit to use and how to use it in case of fire.

Family Characteristics

Most of the material in the section of the consultation paper that dealt with family characteristics was presented in guideline form and as a consequence will not be discussed in this paper.

SDM-15 Physical Requirements for Supplementary Foster Homes

Proposed Standard

SDMS-15.1 **The placement agency shall record in the applicant's file any physical barrier in the home that restricts access or reduces mobility of a child with a physical handicap.**

Commentary

Most respondents agreed with this proposal. Some suggested that it was applicable only to applicants willing to consider children with physical handicaps. It has been deleted from the final standards because the continuum of care typology has been dropped.

SDM-19 **Foster Home Study Summary**

Proposed Standard

SDMS-19.1 **The worker shall complete the home study, prepare a summary of the home study and meet with the applicant to share the content of the summary within 30 days of the first screening interview.**

Commentary

The intent of this proposal was to ensure that the agency completes its assessment of prospective foster parents within a reasonable time and explains to them the reasons for its decision to accept or reject their application for fostering. There was general agreement with this intent. However, a number of respondents indicated that it was neither practicable nor advisable to require completion of the assessment within 30 days. Many agencies schedule group orientation and/or training programs for prospective foster parents at intervals. Foster parents often take up to two weeks after an initial screening or an orientation session to decide whether they wish to pursue their application further. It sometimes takes longer than 30 days to get all the personal and medical references needed to complete the assessment of the applicants. Respondents suggested 60 or 90 days as a more reasonable time frame. It was also suggested that it was excessive to require completion of a summary as well as the home study.

The final standard has been revised to take account of these comments and reworded to convey the concept of an assessment of the family and their home rather than just a study of the home and retitled accordingly. It is numbered SDMS-05.1.

SDM-05 The Assessment Decision

Final Standard

SDMS-05.1 The operator shall complete an assessment of the foster family and their home, prepare a written report and arrange to meet with the applicants to share the content of the report within five working days of the decision to accept or reject the applicants.

SDM-20 Unsuitability of Applicant

Proposed Standard

SDMS-20.1 **The placement agency shall reject the application of any applicant where an act of child abuse by the applicant or any resident in the home is verified, or where there are reasonable grounds to suspect that such an act has been committed. The placement agency shall have a written policy and procedures regarding acceptance or rejection of applicants who are suspected of child neglect or where verification of this exists.**

Commentary

The intent of this proposal was to provide clear criteria for rejection of applicants to ensure the safety and well-being of foster children. Most respondents supported the proposal but with some qualifications. There were objections that the proposal as written was too narrow and that it was inappropriate to designate child abuse alone as a ground for rejecting an applicant. One respondent objected that the proposal did not recognize the possibility that people will change and grow and argued for agency discretion in this area. A number of respondents suggested that the standard be revised to require more broadly that the agency have written policies and procedures regarding acceptance and rejection of applicants. It was suggested that the policies cover neglect and other criteria for acceptance or rejection of applicants in addition to abuse.

Respondents did not agree as to how cases of suspected abuse should be handled. Some respondents suggested that "reasonable grounds to suspect that such an act has been committed" was too vague. Others questioned the appropriateness of the reference to "any resident in the home" since this could apply to a case where one child abused another. One respondent suggested that an applicant rejected on the basis of suspected abuse should have access to a grievance procedure that would assist in rectifying situations where applicants were rejected on the basis of totally unsubstantiated suspicions.

Another question that was raised was how the agency would ascertain whether child abuse had been "verified". The proposal seemed to require a routine record check of all applicants with the child abuse registry and this would be particularly problematic since the only placing agencies that currently have access to the registry are the Children's Aid Societies and Probation and Aftercare Offices. A few respondents suggested that perhaps a criminal record check with the police should be required as well. It was also suggested that if abuse checks are to be required of prospective foster parents, they should also be required of prospective staff members.

It is agreed that the proposal was too narrow in focussing on abuse and neglect as criteria for rejection. The final standard has been revised to require that the operator have a policy and procedures regarding acceptance or rejection of applicants specifically to include verified and suspected child abuse and neglect. Thus the standard ensures that the policy will cover abuse and neglect but gives the operator discretion in developing the policy. The final standard is numbered SDMS-06.1.

SDM-06 **Unsuitability of Applicant**

Final Standard

SDMS-06.1 The operator shall have a written policy and procedures regarding acceptance or rejection of applicants and the policy shall specifically cover verified and suspected child abuse and neglect. The policy and procedures shall be made available to workers responsible for the foster family assessment.

SDM-21 **Provisional Homes**

Proposed Standard

SDMS-21.1 **The placement agency shall ensure that a worker visits a home where any child under the age of 16 years is placed on a provisional basis as soon as practicable after placement, but not longer than 24 hours to determine that the standards for basic requirements for foster families are met.**

Commentary

The home where a child is placed on a provisional basis or a provisional home, was defined in the consultation paper as a home a child may have selected or the home of a relative or other adult known to a child who agrees to care for that child but does not wish to foster other children. Such homes have not been selected on the basis of a foster home study.

The consultation paper took the position that such homes need to meet minimum standards to ensure the safety and well-being of the children in their care. These were defined as the standards for what the paper called "basic requirements for foster families". The proposals in this area included standards for family health, safety and housing. Family characteristics and work by the foster family with the placing agency, also presented in the paper as part of basic requirements for foster families, were treated in guidelines only. The paper placed strong emphasis, however, on the importance of evaluating the appropriateness of the family accepting the responsibility for the care, health, safety and welfare of the child, the suitability of the home and the capacity of the family to meet the individual needs of the child.

As previously indicated in the discussion of proposed standard FPS-09.5, the paper expected consideration to be given to provisional placement of a child with his immediate and extended family prior to placement selection. It stated that the agency must examine the ability of the relative to work jointly with the child's natural parents and to assist in making and following a plan of care for a child. It said that the desires of the natural family should be respected; where natural parents are opposed, placing with relatives is not usually advisable. The paper envisaged clearly stated roles for the natural parents, the relatives and the placing agency. Services provided by the placing agency to support the provisional home would be the same as those provided for any foster home.

Comments on proposed standard SDMS-21.1 ranged from outright support for to flat opposition to the concept of provisional homes. The majority of agencies commenting on the proposal supported it but most did so with some reservation, mainly that the requirement for a visit within 24 hours was unrealistic, particularly where long distances must be travelled, after normal working hours and on weekends. Ideally, as some respondents commented, provisional placements should be preplanned. However, as one agency noted, "often teens find their own on the run...and have been in the placement for a number of days or weeks when tracked down."

A small minority wanted more relaxed standards to apply to provisional homes than SDMS-21.1 proposed, since they valued the help of relatives in maintaining the child's family ties and feared the loss of such homes under more stringent standards. There "must be an awareness that provisional homes do not always meet foster home standards - balance is decided between this and best interests of child," said one submission. Some other respondents, on the other hand, worried about the existence of substandard homes. "Acceptance of a lower standard for some foster homes is detrimental to the image of foster parents in general," commented a foster parent association. Another small minority of agencies argued that the normal process of assessing potential foster homes should be used for provisional homes and indicated that this was their practice.

Some comments questioned the definition of provisional homes in the paper, while others found the reference to basic requirements in the standard ambiguous. One agency would define a provisional home as a foster home opened for a specific child. Another requested that a distinction be drawn between placements with relatives and provisional placements in general. Another suggested a clarification that the proposal applied to emergency, after-hours service seven days a week, not just during normal operating hours. Some agencies sought clarification as to whether the proposal would apply to "boarding homes" used for older adolescents in care. Some suggested that it apply to provisional homes for children up to the age of 18 years.

A few agencies expressed concern as to their liability for placements in provisional homes, particularly where placements are made with a relative and/or on an emergency basis. "Would these placements necesssarily be safe?" asked one submission. Conversely, it was also suggested that the Child Welfare Act's requirement that a child be in a place of safety is a sufficient legislative expectation.

Most of the specific requests for changes of wording in the proposal focussed on the time element. Suggestions were variously to omit a deadline for a visit or to change the requirement to "make contact within 24 hours" or to extend the time period for the visit to within two or three "working days" or five days. Other suggestions were to omit reference to the age of the child or to substitute "any child in care", thus covering children up to the age of 18 and to eliminate reference to determining that the standards for basic requirements for foster families are met or to substitute "to determine whether the child is in need of protection".

After reviewing these responses, the Ministry is satisfied that the concept of a provisional home is a useful one that enables agencies to place children in homes where they are known and welcome and to which they may have some ties. The Ministry does not believe that it is necessary or indeed appropriate to differentiate between placements with relatives and provisional placements generally. In either situation, immediate assurance is needed that the child is cared for in a place of safety. The proposal has therefore been retained in the final standards with some revisions and additions to provide the clarity and detail about the basic requirements and the supports for provisional homes which are necessary to ensure the safety of the child. Agencies using provisional homes will be expected to comply with these requirements but may establish more demanding standards for homes opened specifically for particular children if they so wish. Agencies also, of course, have the option of not using provisional homes at all as they prefer.

Thus the final standard requires a visit as soon as practicable within 24 hours after the child is placed or located in the home, unless otherwise authorized by a supervisor, to determine that the home is a safe and healthy environment for the child, to ensure that the home has access to a means of communication with the agency and to inform the receiving family of the serious occurrences that are to be reported to the agency. Accommodation requirements for provisional homes will not be as rigorous as those for foster homes.

Over the longer term, the placing agency will be required to establish that the particular needs of the child are being met in the placement, just as it does for any child in care. Within 30 days of the initial visit of inspection, the agency will be required to initiate an assessment to determine the suitability of the provisional parents to care for the child. The agency will also be expected to develop and finalize a plan for the child while he is in the provisional home within 30 days if he has just been taken into care, or to revise the existing plan if the provisional home is a change of placement, and to do so in consultation with and with the agreement of the provisional parents. The agency will be expected as well to conclude an arrangement with the provisional parents, which will cover the respective responsibilities of the agency and the provisional parents for meeting the child's needs, support to be provided to the provisional parents and financial arrangements for the child's care. In the course of the regular review of the plan, the agency will ensure that the child's needs are being met in the provisional placement. If they are not and the return of the child to his natural family is not possible, a transfer to an approved foster home or another form of residential care must be considered.

The requirements for provisional homes will not be applied to "boarding homes" providing an independent living situation for an older adolescent of 16 years or older.

The final standard is a placing agency standard numbered PAS-09.1.

PA-09 **Provisional Homes**

PLACING AGENCY STANDARD

PAS-09.1 Where any child is in a home on a provisional basis, the placing agency shall ensure that:

a) A worker visits the home as soon as practicable within 24 hours, unless otherwise authorized by a supervisor or his designate, to determine that the home is free of hazards to health and physical safety and has a means of communicating with the placing agency.

b) The provisional parents are informed in writing of the serious occurrences involving the child that the provisional parents shall report immediately to the placing agency, and are provided with emergency telephone numbers to call to report serious occurrences taking place after office hours. The serious occurrences that shall be reported include:

- i) the death of the child
- ii) serious illness, serious injury or hospitalization of the child
- iii) a charge under the Young Offenders Act
- iv) abuse or mistreatment of the child
- v) apprehension by police
- vi) alcohol or drug abuse
- vii) fire or other disasters in the home
- viii) absences of the child without permission from the home
- ix) any other serious occurrence pertaining to the child.

c) Within 30 days of the first visit by the worker, the following requirements are fulfilled:

- i) a further visit with the child and at least one parent within seven days of the arrival of the child and where there is another parent, with the other within 30 days
- ii) commencement of an assessment to determine that the parents are appropriate persons to care for the child
- iii) work with the provisional parents to develop or revise a plan for the child, and agreement of the provisional parents to the plan.

d) An arrangement is made with the parents in the provisional home for support services to be provided during the child's stay in their home.

e) The home continues to be visited by the placing agency once every three months thereafter.

SDM-22 **Orientation**

Proposed Standard

SDMS-22.1 **The placement agency shall provide an orientation on fostering for new foster parents that begins within 30 days of foster home approval and includes a minimum of one individual or one group meeting. During orientation, the placement agency shall provide written material to foster parents on foster care policies and practices of the agency.**

Commentary

The consultation paper described orientation as the first step in preparing successful applicants and their families for fostering. Its purpose was defined as being to clarify the role the foster parents will play in the life of a foster child, the responsibilities they will be expected to assume, the policies and standards to which they must adhere and the practices and procedures of the agency in meeting the needs of the child and in supporting the foster parents.

There was general agreement with the concept of orientation for foster parents. In fact, many of the placing agencies responding to the proposal above indicated that they conduct a substantial orientation and/or pre-service training program for foster parents that well exceeds the minimum requirements of the proposal. A number of agencies indicated that their orientation program is carried out prior to approval of the foster parents. One agency noted that applicants sometimes decide to withdraw as a result. Also, some agencies stated that the 30-day limit was problematic especially for rural communities and small agencies. Sixty days was suggested as a more reasonable expectation.

The final standard recognizes that orientation of foster parents is an ongoing educational program. The proposed requirement that orientation begin within 30 days of foster home approval has been replaced by a requirement that orientation begin prior to placement of the first child in the home. This will accommodate the range of existing practices across the province and will ensure that foster parents have the essential contact with and orientation from the agency phase to the placement of the first foster child.

The requirement that the operator provide material on policies and practices at the start of orientation rather than during orientation is intended to ensure that foster parents have ample time to review and discuss the material. The final standard is numbered SDMS-08.1.

SDM-08 Orientation

Final Standard

SDMS-08.1 The operator shall begin an orientation to fostering for new foster parents prior to the placement of the first foster child in the home including a minimum of one individual or one group meeting, and provide written material to foster parents on the operator's foster care policies and practices at the start of the orientation.

SDM-23 Service Agreement

Proposed Standard

SDMS-23.1 A service agreement shall be concluded between the foster parents and the placement agency before the placement of the foster child. The service agreement shall include:

a) assignment of responsibilities and obligations to either the foster parent or the placement agency for meeting the child's needs, specifically in relation to:

    i) court appearances
    ii) record keeping
    iii) attendance at case conferences, and reviews

    and any other responsibilities as agreed to in the Plan of Care (SEE: FPS-07.1)

b) support and training services provided by the placement agency to the foster parent during the placement of the child:

    i) form and frequency of casework
    ii) relief services to be provided
    iii) direction and/or training to meet the child's needs

c) financial arrangements for the care of the child:

    i) board rate
    ii) clothing allowance
    iii) personal spending money
    iv) special purchases.

Commentary

The intent of the proposed service agreement was to help clarify the roles, responsibilities and obligations of the foster parents and the agency. For the most part, there was support for the concept of a service agreement between foster parents and agencies. There were some comments that the service agreement and the child's plan of care appeared to overlap, and a duplication of effort should be avoided. It was suggested that the service agreement should be generic rather than specific to the individual foster child. Some agencies preferred an oral to a written agreement. Some agencies saw additional staff time costs if written and individual agreements were required. A few agencies found the concept of the service agreement too formal and legalistic and in conflict with either the voluntary nature of foster care service or the collegial relationship of foster parents and agency staff. There was a suggestion that the term "casework" be avoided, since this implied a client relationship between foster parents and staff. It was also suggested that subsidies should be covered in the section on financial arrangements.

The final standard reflects these comments. It has been revised to clarify that it is intended to be a generic agreement that is to be reviewed and updated as necessary. The focus of the foster care service agreement is on the broad roles and responsibilities of the foster parents and the operator and on the supervision and supports to be provided to the foster parents by the operator, while specific responsibilities towards an individual foster child will be set out in the child's foster care plan. Several provisions have been added, including a signed statement of confidentiality that is the basis for disclosure to the foster parents of the information relevant to the care of a foster child, the frequency of performance evaluation and the basis for termination. The final standard requires the agreement to be in writing, to be updated at least annually or at the request of the foster parent and is numbered SDMS-07.1.

SDM-07 **Foster Care Service Agreement**

Final Standard

SDMS-07.1

The operator shall conclude a written foster care service agreement with the foster parents during the approval process, prior to the placement of the first foster child. The service agreement shall include:

a) the respective roles, responsibilities and obligations of the operator and the foster parents

b) support and training services provided by the operator to the foster parents during the placement of children including:

  i) frequency and form of supervision
  ii) relief services
  iii) training opportunities
  iv) professional consultation for the foster child

c) financial arrangements for the care of children:

  i) the basis for determining the amount of payment
  ii) the method of payment
  iii) frequency of payment
  iv) reimbursable expenditures

d) a statement of confidentiality signed by the foster parents

e) frequency of performance evaluation

f) the basis for termination.

The operator shall review the service agreement at least annually or at the request of the foster parent as the needs of the child dictate and shall update specific provisions as changes are made.

SDM-24 Worker Availability

Proposed Standard

SDMS-24.1 **The placement agency shall ensure that a worker or foster parent is available at all times to respond to foster parent inquiries within 24 hours of the contact. A worker shall be available at all times to respond to emergencies reported by foster parents.**

Commentary

This proposed standard was the first of several proposals intended to ensure the provision of support services to the foster family. There was general agreement with the proposal to require that a worker be available to respond to foster parent inquiries. There was agreement as well that a worker should be available at all times to respond to emergencies reported by foster parents. However, some placing agencies disagreed with the suggestion that all foster parent inquiries need to be handled within 24 hours of the contact. It was suggested that agencies should have greater flexibility to respond to requests or inquiries of differing priority and that foster parent inquiries not of an urgent nature need not be treated as such.

The requirements in proposed standard SDMS-24.1 appear in separate final standards. The proposal dealing with the availability of the worker to respond to inquiries has been incorporated into a new standard numbered SDMS-10.1 and titled "Supervision and Support of Foster Homes". The requirement pertaining to the availability of the worker to respond to emergencies is included in final standard SDMS-11.1, which deals with relief and emergency services and is so titled.

SDM-11 **Relief and Emergency Services**

Final Standard

SDMS-11.1 The operator shall have written policies and procedures for the provision of both planned and emergency relief services for foster parents when required and shall ensure that a worker is available to respond within 24 hours to emergencies reported by foster parents.

Proposed Standards

SDM-25 **Frequency of Casework**

SDMS-25.1 The placement agency worker or a designate of the director shall visit the foster family home and talk with at least one foster parent within the first seven days of placement of the foster child and with both foster parents within the first 30 days of the placement.

SDMS-25.2 A worker shall visit every foster home where a child is placed every three months.

SDM-26 **Form of Casework**

SDMS-26.1 The placement agency worker and the foster parents shall discuss and agree on the form of casework to be provided by the agency at the beginning of any new placement and when a change in form is requested by either the foster parents or the placement agency.

SDM-27 Continuity of Worker

SDMS-27.1 The placement agency shall assign a worker the responsibility for the management of support services to each foster family. The foster parents shall be informed in writing of any change in assigned worker a minimum of two weeks in advance of the change, and identify a worker responsible for managing support services for the foster family until another worker is assigned permanently.

SDM-28 Maintenance of Foster Homes

SDMS-28.1 The placement agency worker assigned responsibility for the management of support services to a foster family approved for placement shall contact the family every three months whether or not the family is currently caring for a foster child.

Commentary

The intent of these proposals covering the frequency of casework, its form, worker continuity and maintenance of foster homes was to ensure the provision of ongoing support to foster parents through regular contact between the worker and the foster family. For that reason, the commentary on these proposals will be considered together.

With respect to frequency of casework, the consultation indicated general agreement with one visit every three months as a minimum requirement, and that more frequent visits would be preferred practice. Nearly all Children's Aid Societies responding to the proposals agreed with the proposed frequency of visits to a home where a child is placed. However, one Society as well as some foster parent and probation and aftercare groups and some agencies working with disturbed or developmentally handicapped children commented that visits should take place more frequently than specified in the proposal. Two other Societies, on the other hand, recommended an exemption in the case of visits to foster parents with children in long-term care. A number of respondents noted that both foster parents are not always available and suggested deletion of the reference in the first proposal to both foster parents. One respondent objected that the reference to both foster parents assumed incorrectly that the family is always a two-parent family. There were a few objections to the term "casework" again as wrongly implying client status for foster parents.

Most respondents supported the proposal regarding form of casework. However, a number thought it was redundant insofar as it was covered in both the service agreement and the plan of care.

Most respondents supported the continuity of worker proposal, although a few Children's Aid Societies indicated that their size or staff complement would not permit the assignment of a separate worker to support foster families. With regard to the proposal to inform foster parents in advance and in writing of a change of worker, many societies responded that such requirements were undesirable and not always practical. It was suggested that a telephone call is preferable to a formal letter of notification in many situations.

Regarding the proposed standard concerning the maintenance of foster homes, most respondents agreed with the requirement to contact foster families on a regular basis, even those who are not currently caring for a foster child. However, some respondents favoured more frequent contact than every three months while others appeared to interpret the proposal to mean that a visit rather than telephone contact would be required, and indicated that they thought a visit every six months adequate or more practicable. A few respondents objected that the proposal was too specific in stipulating the worker who would make the contact.

The proposals above, together with the proposal concerning availability of a worker to answer foster parent inquiries have been combined in a single final standard numbered SDMS-10.1 and titled "Supervision and Support of Foster Homes". The standard has been worded to make clear that the operator is to assign a worker to supervise every foster family approved for placement. In assigning staff to every foster family, the operator will carry out its responsibility to work with foster parents to assist in ensuring the growth and development of children in foster care. The wording permits the operator to assign the same worker to work with both the child and the foster parents. No mention is made of "casework" with the foster family; it is agreed that the term would be inappropriate here. The proposed requirements for frequency of visits to a family where a child is placed have been retained and combined in one provision. The requirements are a minimum in that a visit with at least one foster parent rather than both parents is the expectation. A separate provision requires contact every three months with a family not currently caring for a child. Again, operators are likely to contract to visit foster parents and children more frequently as the needs of the child and other circumstances warrant.

SDM-10 Supervision and Support of Foster Homes

Final Standard

SDMS-10.1

> The operator shall assign a worker to supervise and support every foster family approved for placement and to arrange for the support services provided for in the service agreement. The worker shall:

a) respond to foster parent inquiries within 24 hours of the contact

b) visit a foster family home where a child is placed and talk with at least one foster parent within seven days of the placement, once again within 30 days of the placement and every three months thereafter

c) contact a family not currently caring for a child every three months.

SDM-29 Relief Services

Proposed Standards

SDMS-29.1 **The placement agency shall provide emergency relief services for foster parents when required.**

SDMS-29.2 **The placement agency shall provide relief from foster care for foster families. The type and duration of relief shall be agreed upon between the foster family and agency when the child is placed.**

Commentary

There was general agreement that relief services should be available to foster parents on both an emergency and a planned basis. One respondent indicated that it appeared that relief would be made mandatory in all foster care situations regardless of the need or the type or the duration of the placement. Others suggested that relief needs are not always evident at the time a child is placed and that it is not appropriate to specify the type and duration of relief at the time of placement. Some respondents suggested that the word "provide" in both proposals be changed to allow for those situations where the foster parents make their own relief arrangements or the agency facilitates the provision of relief services rather than providing them directly. It was also suggested that the two proposals be combined.

As previously indicated, these proposals have been combined in the final standard dealing with relief and emergency services, SDMS-11.1. That standard requires the operator to have written policies and procedures for the provision of both planned and emergency relief services for foster parents. This allows for the operator to develop relief services that are workable and tailored to the particular needs of the foster parents.

SDM-30 Foster Parent Development

Proposed Standard

SDMS-30.1 **Every placement agency shall have written policies and practices with respect to:**

a) development of foster parents providing regular foster care

b) instruction in the development and skill training of handicapped children for foster parents providing supplementary foster care

c) instruction in the management and treatment of disturbed children for foster parents providing special foster care.

Commentary

The consultation paper described developmental activities as one of the primary support functions of the placing agency. The proposal above was intended to ensure that all foster parents are provided with opportunities for continuing education and instruction to assist them in caring for children placed in their home. There was general agreement with the need for foster parent training and development. Some respondents requested that references to the proposed placement types be deleted. A few expressed concern about the cost of training. A probation and aftercare group suggested that the Ministry develop training packages for foster parents since needs would be similar across the province.

Reference to the proposed types of care have been deleted from the final standard. The standard requires the operator to develop written policies and practices designed to ensure the development of foster parents that will include child development information and is numbered SDMS-12.1.

SDM-12 Foster Parent Development

Final Standard

SDMS-12.1 The operator shall have written policies and practices with respect to development of its foster parents.

SDM-33 Annual Foster Home Review

Proposed Standard

SDMS-33.1 **The placement agency shall complete an annual written review of each foster home. The review shall include a minimum of one interview by the worker assigned the care of the children in that home with all foster family members. The written review shall be signed by both the foster parents and the worker, and shall be placed in the foster family's file.**

Commentary

The review proposed here was seen as a detailed review of the care provided by the foster family in relation to the agency's support services. The purposes of the review would be to allow the worker and the foster family to determine the desirability of the family continuing to provide foster care in light of any changes in the family and its needs or in the needs of the children in care, and to evaluate the support services of the agency and review the service agreement.

Most respondents agreed with the proposed requirement for an annual written review of the foster home. Some foster parent groups welcomed the requirement that the foster parents sign the review, indicating that in their agencies it is not current practice to show foster parents their reviews. Some respondents, however, suggested that the worker conducting the review should not be specified to allow for different organizational arrangements. A number of respondents suggested also that the requirement that all family members be interviewed be dropped since it may be either difficult or undesirable to interview all family members. Some placing agencies indicated that implementation of the proposal would increase their staff time and thus their costs.

The proposal has been retained in the final standards but the sentence specifying the worker and requiring an interview with all foster family members has been deleted. The final standard is numbered SDMS-15.1.

SDM-15 Annual Foster Home Review

Final Standard

SDMS-15.1 The operator shall complete an annual written review of each foster home following a minimum of one interview with the foster parents for that purpose. The review shall be signed by both the foster parents and the operator and shall be placed in the foster family's file.

SDM-34 Service Complaint from Foster Parent

Proposed Standards

SDMS-34.1 The placement agency shall have a written grievance procedure stating the following elements of the procedure:

a) in what circumstances a proceeding is held

b) how to request a proceeding

c) who is involved

d) the structure of the proceeding

e) the authority of the ruling made.

The outcome of the appeal shall be recorded in the foster family's file.

SDMS-34.2 Every service complaint by a foster parent shall be investigated as soon after the complaint as possible, but not longer than five days after receipt of the complaint. The results of the investigation shall be reported to the foster parent.

Commentary

The intent of these proposals was to ensure that foster parents have access to a clear process for the airing of service complaints or to challenge a placement or re-placement decision or the closure of their home and that such complaints are handled promptly.

All respondents agreed with the proposals in principle. There were a few suggestions that the process should specify the organizational level or levels at which the complaint would be heard and dealt with and that an independent party should be involved in the investigation. It was also suggested that there should be an appeal process in the event that the foster parent wished to appeal the outcome of the decision of the initial complaint procedure. Addition of a requirement that foster parents be informed of the process was also suggested. Some respondents questioned the required timing of the investigation, suggesting that the complaint be investigated within "ten working days" or that the investigation be "initiated" within "five working days".

The first proposal has been revised to require the operator to have a written complaint process for foster parents and to make this available to foster parents during orientation. Among other requirements, the process is to state in what circumstances a review of the complaint is initiated, who is involved and the appeal procedure. The final standard is numbered SDMS-16.1. The second proposal has been revised to state that the investigation of the complaint must be initiated within five days of the receipt of the complaint and has been combined with the first proposal in final standard SDMS-16.1.

SDM-16 **Service Complaint from Foster Parent**

Final Standard

SDMS-16.1

The operator shall have a written complaint process for foster parents that shall be made known to foster parents during orientation. The written complaint process shall state:

a) how to launch a complaint

b) the circumstances of a complaint that would warrant an investigation of a complaint

c) who is to be involved

d) the structure of the review hearing

e) the authority of any conclusions

f) the appeal procedure.

The operator shall respond to every service complaint from a foster parent within 24 hours of receiving the complaint and begin an investigation within five working days if warranted. The results shall be reported to the foster parents within five working days of concluding the investigation and shall be recorded in the foster family's file.

SDM-35 Complaint Against Foster Family

Proposed Standard

SDMS-35.1 **The investigation of any complaint received by the operator concerning a foster family regardless of nature shall be initiated within 24 hours.**

Commentary

This proposal was intended to ensure that any complaint lodged against foster parents is quickly and fairly dealt with. Again, there was general agreement with the proposal in principle. A number of placing agencies, however, objected to the proposed requirement for an investigation within 24 hours regardless of the nature of the complaint, and argued that agencies should have discretion in the matter of timing except where the safety of children is involved.

The final standard has been revised to require that the operator respond to every complaint against a foster family concerning the care of the foster child within 24 hours of receiving the complaint to determine whether an investigation is warranted, and to begin an investigation within five working days if this is the case. Further requirements for recording the results of the information in the foster family file and reporting them to the foster parents have been added to the standard in the interest of fairness to the foster family. The final standard is numbered SDMS-17.1.

SDM-17 Investigation of Complaint Against Foster Family

Final Standard

SDMS-17.1 The operator shall respond to every complaint against a foster family concerning the care of their foster child within 24 hours of receiving the complaint and begin an investigation within five working days if warranted. The results shall be reported to the foster parents within five working days of concluding the investigation and shall be recorded in the foster family's file. The recording shall include:

(a) the circumstances of the complaint that warranted the investigation

(b) who was involved

(c) the structure or form of the investigation

(d) the recommendation

(e) the decision made or action taken.

SDM-36 Foster Home Closure

Proposed Standards

SDMS-36.1 **The placement agency shall provide workers with written policies and procedures for closing foster homes against the wishes of the foster parents.**

SDMS-36.2 **The placement agency shall send the foster parents a letter signed by the director of the agency stating that their home is officially closed, and that any agreements they have entered into with the agency or its workers are terminated.**

Commentary

There was general agreement with these proposals which were intended to ensure that agencies deal forthrightly and fairly with foster parents over the sensitive issue of the closure of their home. A number of placing agencies indicated that a letter should follow a personal interview. Some agencies and foster parent groups suggested that the letter should state the reasons why the home is being closed. Some agencies also suggested that the letter could be sent by a person designated by the agency director.

The proposals have been combined in a single final standard numbered SDMS-18.1, which requires the operator to provide workers with written policies and procedures for closing foster homes in any situation. The suggestion from the consultation that at least one interview with the foster parents be required when closing the home against their wishes has been added as part (a) of the standard. Reference to the designate of the operator has been added to part (b), which deals with the letter notifying the foster parents of the closure of their home. Inclusion of the reasons for termination in the letter is good practice and remains a guideline.

SDM-18 Foster Home Closure

Final Standard

SDMS-18.1 The operator shall provide workers with written policies and procedures for closing foster homes. In situations where the foster parents oppose the operator's decision to close their home, the procedures shall include:

(a) a minimum of one interview with the foster parents

(b) a letter signed by the operator or his designate sent to the foster parents stating that their home is officially closed and that any agreements they have entered into with the operator or its workers are terminated.

SDM-37 Contents and Maintenance of Foster Family Files

Proposed Standards

SDMS-37.1 **The placement agency shall maintain a written file for every foster family approved and open for placement of children. The record shall include the following:**

- **a) the home study summary (SEE: SDMS-19.1)**
- **b) a copy of all service agreements (SEE: SDMS-23.1)**
- **c) a copy of every annual review (SEE: FPS-35.1)**
- **d) a recording of the meeting between worker, foster child and a foster family in preparation for placement change (SEE: FPS-37.1)**
- **e) a record of any investigations regarding a complaint against the foster family (SEE: SDMG-35.1)**

SDMS-37.2 **The foster parents shall have access on request to all information in the file on the foster family.**

Commentary

The commentary on these proposals stated that well-documented, current records on foster homes are essential for the purposes of placing children appropriately, of maintaining adequate supervision over the care provided and of assessing foster parents' needs for support, training and development. It noted that the first proposal listed requirements stated elsewhere for recording on the foster parents and family. The commentary also stated that foster parents are entitled to know the content of files on the family, have access to them on request and consent to the release of information on themselves.

Respondents generally agreed with the requirements in the first proposal. Some respondents, however, objected to section (b) as unduly cumbersome on the assumption that it referred to individual service agreements specific to each child placed in the foster home. There were objections also to section (d) as excessive since this information would be in the child's file. It was suggested that any appeal by the foster family under the proposed grievance procedure be added as section (f).

Nearly all respondents endorsed foster parent access to their own files. Several placing agencies expressed concern that workers would need training and suggested that agencies should be able to exercise judgement. A number of agencies and foster parent groups objected to access by foster parents to the file if it contained references, concerns, complaints or other material given in confidence. There was also a suggestion that all information from other agencies should be removed from the file.

The final standard setting out the contents of the foster family file has been revised to reflect changes in content and terminology in other standards. The final standard is numbered SDMS-20.1.

The second proposal has been revised so that it is parallel in structure with final standard SDMS-21.2, which states who may have access to information held by the operator on a foster child. It specifically excludes references and other information given to the operator in confidence from the information that is to be made available to a foster parent. At the same time, it requires that the foster parent consent to release of his personal information to people outside the employ of the operator. These provisions are consistent with the confidentiality provisions of the Child and Family Services Act. The final standard is numbered SDMS-21.3 and appears under the title "Confidentiality of and Access to Information".

SDM-20 Contents of Foster Families Files

Final Standard

SDMS-20.1

The operator shall maintain a written file for every foster family approved and open for placement of children. The file shall include the following:

a) the assessment of the foster family and their home (SEE: SDMS-05.1)

b) a copy of the foster care service agreement (SEE: SDMS-07.1)

c) a copy of every annual foster home review (SEE: SDMS-15.1)

d) a record of any complaints made by the foster parents (SEE SDMS-16.1)

e) a record of any investigations regarding a complaint against the foster family (SEE: SDMS-17.1).

SDM-21 Confidentiality of and Access to Information

Final Standard

SDMS-21.3 Information held by the operator on a foster parent shall be available to:

a) the foster parent, except for references and other information given to the operator in confidence

b) authorized persons in the employ of the operator

c) other agencies, professionals or hospitals when authorization has been given following written consent to release of the information by the foster parent.

8. MANAGEMENT OF FOSTER CARE SERVICE

The final part of the consultation paper dealt with several aspects of management of foster care service. It proposed standards and guidelines for:

- staffing of foster care service
- statistics, planning and review
- community education, organization and development.

The discussion that follows concentrates on the response to the standards proposed in these areas.

The Standards for Staffing of Foster Care Service

As used in the consultation paper, the term "staffing" referred to the group of workers and supervisors who are directly responsible for the development and implementation of foster care services. The intent of the proposal concerning staffing was to focus on their needs for supervision and support, professional training and development and communication with management. The proposals included basic competencies for both workers and supervisors that were expressed as guidelines and will not be discussed in this paper. Proposed standards for supervision and support, worker orientation and performance evaluation are discussed in the sections that follow.

SFCS-15 Supervision and Support

Proposed Standards

SFCS 15.1 **The placement agency shall provide written practices and procedures to ensure that a supervisor or the designate of the director shall approve the admission of a child to foster care (SEE: FPS-06.1).**

SFCS-15.2 **A supervisor shall evaluate and direct each worker in following placement agency practices and procedures during the first year of employment.**

Commentary

The consultation paper described supervision as including five functions: evaluation, direction, teaching, support of individual workers and accountability for workers' performance. The first of the proposals above was intended to ensure that the worker has the support of his supervisor in the difficult decision to admit a child to foster care. The intent of the second was to ensure that the worker is given adequate supervision and support while carrying out the day-to-day responsibilities of his job.

There was general support for the first proposal. A few agencies serving mentally retarded children and a few private operators indicated that the proposal did not apply to them because they were not involved in the decision to admit a child to care. One Probation and Aftercare Office noted that in the PACO system, a front-line worker may take responsibility for the decision without obtaining prior approval from his supervisor. The proposed requirement is redundant in that placing agency standard PAS-05.1 requires that the decision to place a child in care be made in a meeting of the worker and the supervisor. The proposal has therefore been deleted from the final standards.

There was general support also for the second proposal. Several respondents suggested that although the nature of supervision changes over time as the worker gains experience, supervision is an ongoing process that continues throughout the worker's period of employment. They requested that the reference to the first year of employment be dropped. There were recommendations as well that references to an annual evaluation after the first year and to training and support be added. Other respondents objected that the proposal was not specific to foster care and thus did not belong in a foster care document. After considering these responses, the Ministry has concluded that it would be inappropriate to require that agencies adopt certain personnel practices for only one group of employees, those involved in foster care services. Thus the proposal has been deleted from the final standards.

SFC-16 **Worker Orientation**

Proposed Standard

SFCS-16.1 **The placement agency shall provide the worker within the first seven days of the commencement of employment with written material or an oral presentation on the following policies, practices and procedures:**

a) placement agency philosophy, policy and standards for foster care

b) placement agency structure, management practice and administrative procedures

c) emergency procedures and assessment practices (SEE: FP-04)

d) placement planning and procedures (SEE: FP-12)

e) termination and aftercare practices (SEE: FP-37 and FP-40)

f) procedures for arranging financial reimbursement for foster parents.

Commentary

The intent of this proposal was to ensure immediate and adequate orientation for all new workers to agency policies, practices and procedures, rather than an ad hoc, on-the-job approach to introducing workers to agency operations. The consultation paper suggested that the competence and effectiveness of the worker, whatever his maturity or previous experience, will depend in part on his preparation for the job by his new employer: adequate orientation of all new workers can avert serious misunderstandings, errors or delays in providing service to families and children.

There was general agreement with the need to orient new workers to agency policies, practices and procedures very soon after they begin employment. Several agencies objected that seven days was too short a period for worker orientation. A time frame of ten or twenty working days was suggested instead. One response commented that "too much information can be very overwhelming and will probably not be retained". Another response suggested that written material be provided to the worker within the first seven days and that it be systematically reviewed with the worker by the supervisor during the first three months of employment. Still another requested addition to the proposal of an "overlap period" during which the new worker works alongside the worker who is leaving as proposed in a guideline. A professional association suggested addition of a requirement that each worker sign a statement indicating familiarity with all the policies, practices and procedures, and promising to implement them in fulfilling the position. Several agencies indicated that their policies, practices and procedures were not yet written or were in the process of being written and thus implementation of the proposal would take time. One Children's Aid Society commented that the proposed orientation should be a requirement for all agency workers and not just for foster care workers, while another society and a Probation and Aftercare Office thought the proposal gave undue emphasis to foster care. This proposal like the preceding one, has been deleted from the final standards on the basis that it would be inappropriate to require that agencies adopt certain personnel practices for only one group of employees.

SFC-17 Training and Staff Development

Proposed Standard

SFCS-17.1 **Each worker shall be given a performance evaluation at least annually. The evaluation shall be recorded in writing, and every employee shall be given the opportunity to review and respond to the evaluation.**

Commentary

Most of the proposals dealing with training and staff development assumed implementation of the proposed competency approach to staffing and were made in guideline form. The commentary on the proposals stated that with the competency-based approach, it is possible to strengthen staff training and development by clearly defining what the worker has to be able to do in order to function effectively. Evaluation of the competencies of the individual worker against these requirements allows the worker and the supervisor to identify areas where specific training and development are needed.

Most agencies agreed with the proposal to require an evaluation of each worker's performance at least annually. A Probation and Aftercare Office noted that this is required in the PACO system. There was a suggestion from one agency that the review be conducted every two years after the initial six months and another suggested that the worker be given a copy of the review. However, two agencies suggested that the proposal did not apply to them and one of these stated that rather than conduct written, annual reviews, it did them informally. Again, several Children's Aid Societies questioned the appropriateness of establishing a differential requirement for one group of workers within an agency. This proposal, like the two that preceded it, has been deleted from the final standards as an inappropriate requirement.

The Standards for Statistics, Planning and Review

Proposed Standards

SPR-01 Statistics

SPRS-01.1 **The placement agency shall collect or have available a current record of:**

a) the number of children entering out-of-home care

b) the number of children entering foster care

c) the number of foster homes approved

d) the number of foster homes with foster children in residence

e) the number of homes approved and in use for each type of foster care.

SPR-02 **Planning and Review**

SPRS-02.1 **The placement agency shall prepare as part of its service plan, an annual report summarizing the yearly statistics on children entering foster care and resources available, provide an interpretation and analysis of the statistics, and write a long-term goal for its foster care service.**

Commentary

The intent of the proposed standards for statistics, planning and review was to ensure that agencies providing foster care collect and analyze data on needs and resources in order to evaluate, plan and develop their services. The proposed requirements were distinct from but consistent with mandatory requirements for reporting data on children in care to the Ministry, which uses the data to tracking individual children, identify gaps in service for both groups and individuals, and plan and develop their services.

Nearly all respondents endorsed the first proposal. Respondents suggested addition to the listed data of:

- the number of re-placements and the reasons for re-placement
- the number of foster home closures and the reasons for the closures
- detailed data on the age, sex, wardship status of children in care
- data about problems, goals and treatment methods
- more detailed information about agency resources, including location, number of beds and the type of service available from the resource.

Some agencies commented that the proposal did not apply to their operations, and some placing agencies objected that it did not belong in a paper on foster care.

The second proposal also received the support of nearly all respondents. One Children's Aid Society requested clarification of the reference to a long-term goal for foster care service, and another suggested that the proposed analysis be done on a quarterly basis. Still another society commented that the long-term goal should not require annual rewriting. There was also a suggestion from a Probation and Aftercare Office that the term "service plan", referring to the approach currently used in planning for Children's Aid Societies and Children's Mental Health Centres, be replaced by more general terminology. A few societies objected that the proposal had no place in the paper.

Both proposals have been deleted from the final standards. The Ministry continues to believe that it is desirable for agencies providing foster care service to gather data of the types proposed in order to analyze community needs, and plan and manage their resources on this basis. However, it may not be appropriate to require a service plan-oriented approach to statistics and planning for all placing agencies.

The Standards for Community Education, Organization and Development

CEOD-01 Community Education

Proposed Standard

CEODS-01.1 **The placement agency shall have a program for the ongoing education of the community with respect to its foster care service.**

Commentary

This proposal was intended to ensure that the placing agency interprets to the community the purposes, objectives and practices of its foster care service and ensures the community's understanding of the need for foster care and the philosophy behind the service. The better the community understanding, the more likely it is that the community will recognize requests for assists as appropriate and provide support.

There was general agreement with the intent of this proposal. One Children's Aid Society suggested that the responsibility for communicating the need for and philosophy behind foster care service is one that is shared by the Ministry. Some placing agencies commented that limited manpower precluded an ongoing community education program. One agency suggested that the importance of preventing children from coming into care should also be part of community education. Others objected to inclusion of the proposal with foster care standards, indicating that foster care was just one type of service about which the agency had to communicate with its community. The Ministry agrees that it would be inappropriate to require that agencies introduce a community education program for only one of their services. The proposal has therefore been deleted from the final standards.

CEOD-02 Cooperation With and Coordination of Community Services

Proposed Standard

CEODS-02.1 **The placement agency shall have written practices and procedures for:**

a) working with personnel in the local schools that foster children attend

b) coordinating foster care services with activities of other agencies in the community providing the same or similar services

c) coordinating services to foster children where more than one agency is involved in the support, treatment or delivery of service to foster children and their natural families.

Commentary

The consultation paper suggested that the quality of foster care depends in part on the availability of other services in the community and coordination of foster care service with them. Inter-agency cooperation contributes to continuity of care for the individual child. It also can lead to identification of service gaps and duplication of service between agencies. The proposal above was intended to ensure that the placing agency has practices and procedures for cooperation with and coordination of its service with those of other community agencies.

There was general support for the intent of the proposal. Several respondents in education particularly welcomed the proposal. However, other respondents raised a number of concerns with the content of the proposal either in part or as a whole. Although a number of placing agencies indicated that they do in fact have such policies and procedures, some questioned the necessity of having written practices and procedures in these areas. A private operator commented concerning section (a) that the child should give his consent to be seen by his placing agency worker in the school setting; otherwise, the worker should only meet with school staff. Section (b) drew a few objections that the wording was vague and needed clarification. It was also suggested that "coordinating" in sections (b) and (c) be replaced with "liaising" since agencies do not usually have the authority to dictate practices to other services. Some respondents variously described the standard in general as overregulating, cumbersome and inappropriate for inclusion in a paper specific to foster care service.

This proposal has been deleted from the final standards. It is agreed that inclusion of the proposal among standards specific to foster care is inappropriate. Also, it should be noted that attention to the individual child's educational and specialized service needs is covered in final standards PAS-06.1 and FPS-01.1, which deal with the content of the child's foster care plan. In addition, it is expected that coordination of foster care service with other services at the community level will be assisted by the Ministry's area planning activities.

APPENDIX A

ORGANIZATIONS AND INDIVIDUALS WHO RESPONDED TO THE CONSULTATION PAPER IN WRITING

Placing Agencies and Operators

Southwest Region

Catholic Children's Aid Society of the County of Essex
Catholic Children's Aid Society of Hamilton-Wentworth
Children's Aid Society of the City of Guelph and the County of Wellington
Children's Aid Society of the City of Sarnia and the County of Lambton
Children's Aid Society of the County of Bruce
Children's Aid Society of the County of Kent
Children's Aid Society of the County of Perth
Community Homes Ltd.
Family and Children's Services of Huron County
Family and Children's Services of London and Middlesex
Family and Children's Services of the Niagara Region
Family and Children's Services of Norfolk County
Family and Children's Services of St. Thomas and Elgin
Family and Children's Services of the Waterloo Region
Nairn Family Homes
Parkhill Girls' Home
Probation and Aftercare Services - St. Catharines
Specialized Foster Homes of the Children's Aid Society of Hamilton-Wentworth
Southwestern Regional Centre

Central Region

Ausable Springs Family Services
Barrie and District Association for the Mentally Retarded
Catholic Children's Aid Society of Metropolitan Toronto
Central Toronto Youth Services
Children's Aid Society of the County of Dufferin
Children's Aid Society of Metropolitan Toronto
Children's Aid Society of the Region of Halton
Children's Aid Society of the Region of Peel
Family and Children's Services of the County of Simcoe
Family and Children's Services of the Region of York
Family Day Care Services
Huronia Regional Centre
Jewish Family and Child Service of Metropolitan Toronto
Metropolitan Toronto Association for the Mentally Retarded
Mississauga Association for the Mentally Retarded
Newmarket and District Association for the Mentally Retarded
Ontario Mission of the Deaf
Probation and Aftercare Services - Central Region
St. John's School - Uxbridge

Southeast Region

Children's Aid Society of the City of Belleville, the County of Hastings and the City of Trenton
Children's Aid Society of Kawartha-Haliburton
Children's Aid Society of Ottawa-Carleton
Children's Aid Society of Prescott-Russell
Children's Aid Society of Prince Edward County
Children's Aid Society of the United Counties of Stormont, Dundas and Glengarry
Family and Children's Services of the County of Lanark and the Town of Smiths Falls
Family and Children's Services of Durham Region
Family and Children's Services of Lennox and Addington Counties
Family and Children's Services of Northumberland
Family and Children's Services of Renfrew County
Oshawa and District Association for the Mentally Retarded
Prince Edward Heights
Probation and Aftercare Services - Lindsay
Probation and Aftercare Services - Oshawa
Probation and Aftercare Services - Ottawa
Probation and Aftercare Services - Peterborough

Northern Region

Algoma District Mental Retardation Service
Children's Aid Society of the District of Parry Sound
Children's Aid Society of the Districts of Sudbury and Manitoulin
Children's Aid Society of Sault Ste. Marie and District of Algoma
Family and Children's Services of the District of Kenora
Family and Children's Services of the District of Muskoka
Family and Children's Services of the District of Nipissing
Family and Children's Services of the District of Rainy River - Ft. Frances Social Work Staff
Family and Children's Services of the District of Thunder Bay
Family and Children's Services of the District of Timiskaming
Family Life Centre - North Bay
Kapuskasing and District Children's Aid Society
Northwestern Regional Centre - Thunder Bay
Porcupine and District Children's Aid Society
Probation and Aftercare Services - Fort Frances
Probation and Aftercare Services - Kenora
Probation and Aftercare Services - Sudbury
Probation and Aftercare Services - Thunder Bay
Probation and Aftercare Services - Timmins

Foster Parent Associations

Southwest Region

Foster Parent Association of the Catholic Children's Aid Society of Hamilton-Wentworth
Foster Parent Association of the Children's Aid Society of the City of Guelph and the County of Wellington
Foster Parent Association of the Family and Children's Services of the County of Haldimand
Foster Parent Association of the Family and Children's Services of London and Middlesex
Foster Parent Association of the Family and Children's Services of St. Thomas and Elgin

Central Region

Foster Parent Association of the Catholic Children's Aid Society of Metropolitan Toronto
Foster Parent Association of the Children's Aid Society of Metropolitan Toronto
Foster Parent Association of the Family and Children's Services of the County of Simcoe
Foster Parent Association of the Family and Children's Services of the Region of York

Southeast Region

Foster Parent Association of the Children's Aid Society of Kingston and the County of Frontenac
Foster Parent Association of the Children's Aid Society of Kawartha-Haliburton
Foster Parent Association of the Children's Aid Society of the United Counties of Prescott and Russell

Northern Region

Foster Parent Association of the Children's Aid Society of Sault Ste. Marie and District of Algoma
Foster Parent Association of the Family and Children's Services of the District of Rainy River (Ft. Frances)

Native and Indian Associations and Groups

Association of Iroquois and Allied Indians
Chiefs of Ontario Office
Grand Council Treaty 3
Grand Council Treaty 9
Indian Social Services Council
Ontario Federation of Indian Friendship Centres
Ontario Metis and Non-Status Indian Association
Ontario Native Women's Association
Union of Ontario Indians

Other Associations, Groups and Individuals

Association of Municipalities of Ontario

Cayen, R., Foster Parent, Hagar, Ontario
Chedoke-McMaster Hospitals, McMaster University Medical Centre
Community Information Centre of Metropolitan Toronto

Danson, B., Foster Parent Association, Hamilton Catholic Children's Aid Society

Essex and District Social Planning Council

Flint, Professor B., Institute of Child Study, Faculty of Education, University of Toronto

Jacobs, Dr. J., Professor, Department of Paediatrics, McMaster University

London Area Mental Retardation Working Group

Medical Officers of Health:
  Oxford County Board of Health
  Porcupine Health Unit
  The Regional Municipality of Waterloo
  The Regional Municipality of York

North Bay District Working Group

Ontario Association of Children's Mental Health Centres
Ontario Medical Association
Ontario Psychiatric Association

Sault Ste. Marie Community Council for Social Development

School Boards:
- Borough of East York, Board of Education
- Frontenac-Lennox and Addington County Roman Catholic Separate School Board
- Oxford County Board of Education
- Red Lake Area Combined Roman Catholic Separate School Board
- Sault Ste. Marie District Separate School Board
- The Board of Education for the City of Hamilton
- The Northumberland and Newcastle Board of Education

Scott, A., Brantford, Ontario
Sudbury-Manitoulin District Working Group

The Federation of Women Teachers' Associations of Ontario
The Ontario Association for the Mentally Retarded
The Ontario English Catholic Teachers' Association
The Ontario Hospital Association
The Ontario Association of Professional Social Workers
The Mississauga Hospital Child and Family Clinic

Wilkes, Dr. J.R., Scarborough
Wright, Dr. J.A., President, Ontario Chapter, College of Family Physicians of Canada

Ministries

Ministry of Citizenship and Culture: Steinkrauss, W.,
Acting Executive Director
Multiculturalism and Citizenship Division

Ministry of Community and Social Services: Fletcher, S.,
M.S.W. Student, Waterloo Area Office

Klein, D., M.R. Co-ordinator, Sudbury

McLean, C., Registrar, Child Abuse Register

Moore, Dr. C.J., Program Director,
Surrey Place Centre

Sohn, Dr. H., Manager, Child Abuse and Family Violence Prevention

Smithies, M., Senior Consultant, Home Economics, Operational Support Branch

Ministry of Education: Houghton, R.
Regional Director of Education
Northwest Ontario Region

Ministry of Labour: Sim, F.C.
Human Rights Officer
Ontario Human Rights Commission
Kitchener District Office

Ministry of Municipal Affairs and Housing: Grigor, A.
Housing Manager
Sudbury District Housing Authority

Ministry of Municipal Affairs and Housing: Beaupre, R.
Community Relations Officer
Sudbury

Ministry of Northern Affairs: Aiken, H.S.
Assistant Deputy Minister
Northeastern Region

Ministry of Tourism and Recreation: Hood, G.
Special Assistant to the Assistant
Deputy Minister

Ministry of Tourism and Recreation: Bisch, L.
District Supervisor
Sault Ste. Marie

APPENDIX B

DOCUMENTATION REQUIREMENTS IN THE FINAL STANDARDS

Recording and Filing

Placing Agency Standards

PAS-02.1	List of services that assist individuals and families.
PAS-03.1	Assessment report on child; reason(s) for non-completion within 21 days in child's file.
PAS-05.1	Decision to place the child in care recorded in child's file and where applicable in family's file; supervisor's signature.
PAS-06.1 and 06.2	Foster care plan in child's file. Inability to obtain agreement of natural parents or child over 12 noted in plan. Copy of plan to operator. Contents shared with foster parents, natural parents and child over 12.
PAS-07.1	Process of separation, reactions of child and natural family and reason(s) if no pre-placement visit recorded in child's file.
PAS-08.1	Documentation of health provisions, including cumulative records in child's file.
PAS-11.1	Regular placement review recorded in child's file; supervisor's signature.
PAS-12.1	Reason for not informing child's natural parents of change of placement recorded in child's file.
PAS-14.1	Plan for discharge or transfer with operator's signature recorded in child's file.
PAS-15.1	Written consent to transfer of information relevant to care of child.
PAS-16.1 & 16.2	Written aftercare plan.

Foster Care Standards

FPS-02.2	Written statement of any needs of child that cannot be met in placement and of any reservations of the foster parents placed in child's file.
FPS-04.1	Up-to-date list showing number and location of emergency beds.
FPS-05.1	Written health, medical and dental data necessary for care of child to foster parents.
FPS-07.1	Each foster care plan review, date, any changes and reason(s) for lack of involvement of placing agency, child, natural parents or foster parents recorded in child's file. Supervisor to confirm recording and documentation, complete and sign record.
FPS-16.2	Process of preparation for placement change recorded in child's file.
SDMS-01.1	Up-to-date list of approved foster homes.
SDMS-02.1	References for foster parent applicants from persons in community; written statement re health of applicants from physician or health officer.
SDMS-03.1	Visit of inspection to applicants' home recorded in applicants' file.
SDMS-05.1	Report on assessment of foster family.
SDMS-07.1	Foster care service agreement and updating.
SDMS-15.1	Annual written review of foster home signed by both foster parents and operator recorded in foster family file.
SDMS-17.1	Results of investigation of complaint against foster family recorded in foster family file.
SDMS-21.2	Written consent to release of information on foster child.
SDMS-21.3	Written consent to release of information on foster parent.

Written Policies, Procedures and Practices

Placing Agency Standards

PAS-01.1	Written guidelines for screening.
PAS-04.1	Written criteria for use of out-of-home care.

PAS-09.1	Written information re serious occurrences to be reported by provisional parents to placing agency.
PAS-10.1	Written policy, criteria and procedures for emergency intake. Decision at emergency intake re child's assessment is to be recorded in child's file. Report within 5 days re emergency placement, location of child, probable duration of stay, and goals and objectives.

Foster Care Standards

FPS-06.1	Written policies and procedures for workers and foster families re the involvement of natural parents with their child in care.
FPS-10.1	Written policies and procedures re responsibilities and obligations of workers, foster parents and natural parents in provision of health care and emergency medical care.
FPS-12.1	Written policy and procedural guidelines re purchase and possession of hazardous goods.
FPS-13.1	Written policy re work done and money earned by foster child.
FPS-14.1	Written policy re foster child's privacy in receiving and sending mail and in receiving and making telephone calls.
FPS-15.1	Written policies re discipline that explicitly set out acceptable and unacceptable practices.
SDMS-01.1	Written system for classification and utilization of foster homes; written procedures for recruitment, screening and selection of foster parents.
SDMS-06.1	Written policy and procedures re acceptance or rejection of applicants.
SDMS-08.1	Written material on operator's foster care policies and practices provided to foster parents at start of orientation.
SDMS-09.1	Written policy stating foster care placement selection criteria.
SDMS-11.1	Written policies and procedures for the provision of both planned and emergency relief services for foster parents.
SDMS-12.1	Written policies and practices re foster parent development.
SDMS-14.1	Written information re serious occurrences to be reported by foster parents to operator.

SDMS-16.1	Written process for complaints by foster parents including appeal procedure; results of investigation recorded in foster family file.
SDMS-17.2	Written policies and procedures re investigation of complaints about foster parent use of unacceptable disciplinary practices.
SDMS-18.1	Written policies and procedures for closing foster homes; procedures for closing homes against wishes of foster parents to include letter from operator or designate to foster parents.

APPENDIX C

GLOSSARY

Admission	A stage in the foster care process when the decision is made to separate the child from his natural family and bring the child into foster care.
Adult	A person aged 18 years or older.
Aftercare	The final stage of the foster care process when the placing agency makes a plan for provision of support services to the foster child, foster family and natural family, to ensure that everyone concerned adapts to the change in living arrangements.
Assessment	A process whereby the placing agency examines and attempts to understand a child, his family and their circumstances to determine whether service is needed, the most appropriate form of service and how service should be arranged.
Case Conference	A formal meeting involving some or all of the participants in foster care, including the placing agency/operator, the worker's supervisor, the foster parents, the natural parents, the foster child (depending upon his age and functioning), a psychologist or psychiatrist or others knowledgeable about the foster child and natural family, to review systematically the effectiveness of the plan of care for the foster child and/or the natural parent and to plan for any needed changes in the care or service provided.
Case Management	A means of ensuring that all services provided for the foster child and natural family are properly designed and coordinated, and that there is adequate transfer of information among the placing agency/operator, the foster parent(s), the natural parent(s) and others providing services to the foster child and natural family.

Casework	The provision of intensive support to the foster child and the natural family through the establishment of a continuous relationship between the placing agency worker and the foster child and the natural family.
Child	A person under the age of 18 years.
Director (when capitalized in standards)	An employee of the Ministry appointed by the Minister as a director for all or any of the purposes of the Child and Family Services Act.
Discipline	The act of establishing rules of conduct that serve as a model for the behaviour of the children in a family, and help them learn how to control their own behaviour.
Documentation	Written evidence of the occurrence of an action or event, or the existence of some state of affairs.
Emergency Placement	An unplanned placement of a child in foster family care usually necessitated by an unforeseen crisis that has occurred in the child's immediate living circumstances.
Foster Care	A process that involves the integration of the child into a substitute family that provides residential care according to the individual needs of the child. This process begins when the question is asked whether to separate the child from his natural parents, and involves the integration of the child into a substitute family, ending when the child is stabilized in his natural family, is placed for adoption or becomes legally independent.
Foster Care Plan	A written, individualized, time-limited and goal-oriented statement setting out the specific objectives of foster care for a foster child depending upon the particular needs and situation of the child and his natural family.

Foster Care Service Agreement	An individualized statement clearly setting out the roles, responsibilities and obligations of both the operator and the foster parent for meeting the needs of the child, the support and training services to be provided by the operator and the financial arrangements for the care of the child.
Foster Family Assessment	The collection of information on a family in order to determine whether the family may be successful in fostering and what child would best fit into that family.
Foster Home	A place where parent-model care is provided for four or fewer children under the supervision of an operator through a foster care service agreement.
Foster Parent Complaint Procedure	A series of steps designated to ensure that the foster parents are able to voice, in an appropriate way, disagreements with and problems related to the services an operator is providing to them or to the children in their care, and to challenge a placement or re-placement decision or the closure of their home.
Foster Parents	Persons selected and supervised by an operator to provide substitute family life for a child for a planned period of time.
Guideline	A statement recommending a preferred level of care or performance.
Infant	A child from birth to 18 months of age.
Operator	A person who has control or management of a children's residence or a foster home. Operate has a corresponding meaning.
Parent-Model Care	A form of care in which the nurturing, training and supervision of a child are provided by persons acting as full-time surrogate parents, with provision for occasional relief.

Placing Agency	An agency who places a child outside of his home for residential care.
Placement Review	A regular evaluation by the placing agency worker of the foster child's adjustment and progress towards specified objectives in placement and the likely outcome of care for the foster child.
Provisional Home	A home the child may have selected or the home of a relative of the child who agrees to provide care for this child but does not wish to foster other children. Such a home is usually "opened" for this specific child. A provisional home is approved following an inspection within 24 hours after the child is located or placed in the home.
Recording	The act of putting into written form a representation of an action or event that has occurred, or the existence of some state of affairs.
Recruitment	The process of reaching out into a community for the purpose of enlisting individuals and families to provide foster care.
Relief Services	Support services provided by the operator to foster parents to assist them and increase their ability to cope with the experience of fostering. Relief services may include babysitting, child care or homemaker assistance, day care and weekend or holiday relief.
Reporting	The act of informing another person or organization of the occurrence of an action or event or the existence of some state of affairs.
Satellite Foster Homes	One or more parent-model homes for one to four unrelated children selected, managed and operated by a privately owned and operated agency that is reimbursed by another agency whose wards the children are.
Screening	A process whereby the immediate needs of the child and/or the natural family are identified in order to determine what agency and/or type of service will most appropriately meet those needs.

Separation	A grief process that results from the physical removal of the child from the care of his natural parents, and involves a series of stages similar to mourning. The separation produces anxiety and trauma for the child resulting, depending upon the age of the child, in regression in skill development, behaviour change and weakening of emotional bonds or detachment. Trauma is also experienced by foster parents and natural parents. The manifestation of the trauma depends upon the individual.
Standard	A statement defining a minimum acceptable level of care or performance expressed in precise, measurable terms.
Supervisor	A person who provides direction and support for the evaluation of others. In a placing agency, the supervisor provides direction in case management, guides and develops the worker's ability to help children and families, and provides training and support to workers. A supervisor employed by an operator provides direction and support to workers in the day-to-day responsibilities of helping foster families meet the needs of children in their care.
Support Services	A wide range of activities and practices of the operator that enhance foster parents' ability to foster the child and/or children placed in their care, and to cope with the impact of the experience of fostering. Support services include the following activities: orientation and training, counselling and relief services. Foster parent associations also provide support for their members.
Termination	A stage in the foster care process when placement is planned to end. Termination may be due to a variety of reasons including the return of the child to his natural family, placement for adoption, transfer to another foster home or to a treatment service, or independent living.
Worker	A person on the staff of the placing agency or operator whose primary responsibilities include some or all of the following tasks: determining the child's need for care, planning the child's placement and care, and selecting, developing, managing and supervising the foster home.

APPENDIX D

THE FINAL FOSTER CARE STANDARDS

Foster Care Practices: The Child and Natural Family

The Foster Care Process

FP-01 Planning for Foster Care

FPS-01.1 The operator shall:

- a) accept a child for foster care only after:
    - i) A preliminary assessment of the child has been completed.
    - ii) The immediate objectives of foster care for the child designed to meet the developmental, emotional, social, medical and educational needs of the child have been identified as required in PAS-06.2 (b).
- b) in planning for the child, review with the placing agency the assessment report completed within 21 days after placement of the child
- c) participate with the foster parents in the finalization of the foster care plan to be completed within 30 days after the placement
- d) consult with the agency and the foster parents to ensure that directly or through referral to the appropriate professional, school, clinic or hospital, as part of the foster care plan:
    - i) A developmentally, physically or learning-handicapped or emotionally disturbed child who is not already receiving remedial instruction or treatment for his handicap or disability or emotional disturbance receives an evaluation and/or treatment or consultation as needed.
    - ii) Each developmentally handicapped child receives an individual program plan and each physically handicapped child receives a specific plan designed with the overall goal of moving towards independence in life skills for the child and containing time-limited, measurable objectives.

iii) A plan is developed for the supervision of each emotionally disturbed child and his foster parents that states methods to be used and supports to be provided to the foster parents in managing and caring for the child.

FP-02 Placement Selection

FPS-02.1 Before selecting a placement, the operator shall obtain the following background information from the placing agency:

a) identifying information on the child: full name, sex, birth date, address

b) the child's family background: size, birth order, cultural, racial, linguistic, religious and socio-economic background, parental and other family relationships

c) school information: name and address of school, name of teacher, grade in school, current performance level

d) medical data: name and address of family doctor and/or hospital used, medical problems of the child including physical handicaps or limitations on physical activity, allergies, current medication, history of illness and immunization record as available

e) a description of the child's interests and any hobbies or recreational activities the child enjoys

f) a statement of the child's strengths and problems and known psychological or psychiatric information available including behaviour problems, juvenile record or unusual habits

g) a statement of the child's needs in care

h) the probable duration of foster care and the plans for parental contact and visiting of the child.

Where this information is not available at the time the placement is selected, the operator shall obtain the information from the agency by the time the assessment report is completed. Where this information cannot be obtained, the operator shall note the reason in the child's file.

FPS-02.2 The operator shall select a foster family placement for a child and place the child with that family only after:

a) completion of an assessment of the family and approval of the family for fostering (SEE: SDMS-02.1)

b) disclosure to the foster parents of all information known to the operator about the child that is relevant to the care of the child (SEE: FPS-02.1)

c) agreement by the foster parents to the placement of the child on the basis of this information (SEE: FPS-02.1)

d) agreement by the placing agency to the placement.

A written statement of any needs of the child that cannot be met by this placement, of how the needs will be met and of any reservations or concerns expressed by the foster family about the placement of the child in their home shall be included in the child's file.

FP-03 Capacity of Foster Home

FPS-03.1 The operator shall ensure that no more than four foster children and no more than two foster children under two years of age are placed in a foster home unless otherwise approved by the Director where all of the foster children are of common parentage or related to the foster parents.

FP-04 Emergency Placement

FPS-04.1 The operator shall keep up to date a list showing the number and location of beds available for emergency placement and shall make this list available to workers.

FP-05 Placement

FPS-05.1 The placing agency and/or the operator shall:

a) arrange for a worker known to the child to accompany the child to the foster home on the date of the actual placement, except where the agency's and/or the operator's director or his designate approves another adult accompanying the child

b) ensure that the foster parents have received in writing by or at the time of the actual placement the health, medical and dental data necessary for the care of the child including specification of medical disorders, handicaps, allergies and limitations on activity.

FP-06 **Natural Family Involvement**

FPS-06.1 The operator shall provide written policies and procedures for workers and foster families regarding the involvement of natural parents with their child in care.

FP-07 **Foster Care Plan Review**

FPS-07.1 The operator shall review and if necessary amend the foster care plan with the involvement of the placing agency, the child, the foster parents and the natural parents:

a) at least every three months

b) when there is a change in the child's placement.

The reason or reasons for lack of involvement of these parties shall be noted in the plan. The date of each review and any changes in the plan shall be recorded in the child's file. A supervisor shall examine the file at the time of each review to ensure that the required recording and documentation have been carried out and shall sign and date the record.

FP-08 **Food and Nutrition**

FPS-08.1 The operator shall provide the foster parents with information on the foster child's eating habits so that the foster parents can provide foods to the child that constitute a balanced diet for him. Where a licensed physician prescribes a special diet for a foster child or special feeding arrangements are required, the operator shall provide the foster parents with instructions regarding the preparation of such a diet or the handling of the special feeding arrangements.

FP-09 **Clothing**

FPS-09.1 The operator shall ensure during the period while the child is in foster care that the child has a supply of clothing suitable to the child's size, age and activities, foster family norms and the climate, and that appropriate storage is provided for his clothing.

FP-10 **Health Care Responsibilities**

FPS-10.1 The operator shall provide written policies and procedures for workers, foster parents and natural parents stating the responsibilities and obligations of each party in regard to the provision of health care, including the administration of prescription drugs, hospitalization, medical and/or surgical treatment and emergency medical care.

FP-11 **Education and Learning**

FPS-11.1 The operator shall assign a worker and/or the foster parents to contact quarterly the foster child's teacher and/or school principal and/or other school personnel as necessary, to assess the child's adjustment and progress in school.

FP-12 **Hazardous Goods**

FPS-12.1 The operator shall have a written policy and procedural guidelines with respect to the purchase and possession of any goods for or by the foster child that pose a threat to the foster child's or the foster family's health and/or safety, and shall advise workers and foster parents of the policy and the guidelines.

FP-13 **Daily Chores, Work and Use of Money**

FPS-13.1 The operator shall have a written policy regarding work done and money earned by the foster child inside or outside of the foster home and shall advise workers and foster parents of the policy.

FP-14 **Privacy**

FPS-14.1 The operator shall have a written policy regarding the foster child's privacy in receiving and sending mail and in receiving and making telephone calls, and shall advise workers and foster parents of the policy.

FP-15 Discipline

FPS-15.1 The operator shall provide:

a) written policies regarding discipline that set out acceptable and unacceptable practices for workers and foster parents

b) instruction on acceptable methods of discipline to all foster parents as part of foster parent orientation (SEE: SDMS-08.1).

FPS-15.2 Unacceptable disciplinary practices shall include:

a) deliberately harsh or degrading responses that could result in the humiliation of a child or the undermining of a child's self-respect

b) deprivation of basic needs including food, shelter, clothing or bedding

c) extensive and prolonged withholding of emotional response or stimulation after the undesirable behaviour of the child has stopped

d) placing or keeping a child in a locked room

e) threatening removal of the foster child from the foster home in an attempt to control behaviour

f) corporal punishment by foster parents or by another child or group of children condoned by foster parents

g) punching, shaking or shoving or other forms of aggressive physical contact.

FP-16 Placement Change

FPS-16.1 An operator worker shall meet with the foster child and the foster parents as soon as possible within five days of a request for a change in placement by the foster parents and/or the child to determine whether a change in placement is needed. A decision to move the child shall be made by the operator worker and his supervisor in conjunction with the placing agency.

FPS-16.2 An operator worker shall begin to prepare the foster child and foster family for any change in placement as soon as possible after the decision for placement change is made. Such preparation shall include at least one meeting of the worker with the foster child and the foster parents before the move is made. A record of the process whereby the child and the foster family were prepared for the placement change shall be made in the child's file.

Management of Foster Care Service

Selection, Development and Management of Foster Homes

SDM-01 Classification of Foster Homes

SDMS-01.1 As part of its system for the selection, development and management of foster homes, the operator shall:

a) have a written system for the classification and utilization of its foster homes

b) establish written procedures for the recruitment, screening and selection of foster parents

c) keep up to date a list of approved foster homes

d) supervise its foster homes

e) evaluate its homes annually according to the objectives set for the type and level of care to be provided in the home.

SDM-02 Approval of Foster Homes

SDMS-02.1 The operator shall approve a home for fostering only after:

a) conducting both joint and separate interviews with each parent in a two-parent home and a minimum of one planned interview held in the applicants' home

b) meeting other members of the family and other persons living in the home

c) requesting the applicants to provide the names of at least three persons in the community who can provide references for the family, contacting these persons by letter and/or telephone and making a record of their comments regarding the suitability of the applicants for fostering

d) obtaining a written statement from a licensed physician or an individual approved by the local medical officer of health regarding the general health and specific illnesses or disabilities of foster parent applicants and family members that might interfere with fostering.

SDM-03 **Housing Requirements**

SDMS-03.1 An operator worker shall visit the applicants' home to determine that it is suitable for placement of a foster child. The worker shall see common living areas of the applicants' home, the proposed sleeping area of a foster child, the grounds surrounding the house and play space used by children on the premises or recreational areas within walking distance. A record of the visit shall be made in the applicants' file.

SDMS-03.2 The operator shall determine that the home:

a) has specifically designated spaces for informal living, dining, food preparation and storage, and separate rooms for sleeping and bathing

b) is equipped with a means of providing and maintaining a supply of heat to habitable rooms

c) is in a condition free of hazards to physical safety, and garbage, refuse and other wastes are disposed of in such a way as not to constitute a health hazard.

SDMS-03.3 The operator shall ensure that the regular sleeping accommodation for foster children meets the following minimum specifications unless otherwise approved by the Director:

a) No rooms without windows shall be used as bedrooms.

b) No foster child shall sleep in a building detached from the foster home, an unfinished attic, unfinished basement or a stairway hall.

c) Each foster child shall have a bed appropriate to his age, a clean mattress and bedding appropriate for the weather and climate.

d) No foster child shall share a bed or the sleeping room of any adult couple or adult of the opposite sex unless the needs of an infant or illness of a child require this arrangement.

e) No foster child over six years of age shall share a bedroom with another child of the opposite sex.

SDM-04 Emergency, Fire, Safety and Health Protection

SDMS-04.1 To protect the safety of foster children, the operator shall:

a) ensure that there is a means of communicating regularly and routinely with persons approved for fostering and every foster home has a telephone or access to a telephone except where telephone service is not available to the community

b) inform persons approved for fostering that agency policy regarding weapons is that all weapons including firearms, air rifles, bows and hunting sling shots shall be made inoperable and inaccessible to children when not in use

c) ensure that any home that is approved for foster care has a single station smoke detector with alarm device between the bedrooms and the remainder of the home approved by Underwriters' Laboratories of Canada

d) ensure before a foster child is placed that the foster parents have a procedure for evacuating the home in case of fire. The foster parents shall inform each foster child of the exit to use and how to use it in case of fire.

SDM-05 The Assessment Decision

SDMS-05.1 The operator shall complete an assessment of the foster family and their home, prepare a written report and arrange to meet with the applicants to share the content of the report within five working days of the decision to accept or reject the applicants.

SDM-06 Unsuitability of Applicant

SDMS-06.1 The operator shall have a written policy and procedures regarding acceptance or rejection of applicants and the policy shall specifically cover verified and suspected child abuse and neglect. The policy and procedures shall be made available to workers responsible for the foster family assessment.

SDM-07 Foster Care Service Agreement

SDMS-07.1 The operator shall conclude a written foster care service agreement with the foster parents during the approval process, prior to the placement of the first foster child. The service agreement shall include:

a) the respective roles, responsibilities and obligations of the operator and the foster parents

b) support and training services provided by the operator to the foster parents during the placement of children including:

- i) frequency and form of supervision
- ii) relief services
- iii) training opportunities
- iv) professional consultation for the foster child

c) financial arrangements for the care of children:

- i) the basis for determining the amount of payment
- ii) the method of payment
- iii) frequency of payment
- iv) reimbursable expenditures

d) a statement of confidentiality signed by the foster parents

e) frequency of performance evaluation

f) the basis for termination.

The operator shall review the service agreement at least annually or at the request of the foster parent as the needs of the child dictate and shall update specific provisions as changes are made.

SDM-08 Orientation

SDMS-08.1 The operator shall begin an orientation to fostering for new foster parents prior to the placement of the first foster child in the home including a minimum of one individual or one group meeting, and provide written material to foster parents on the operator's foster care policies and practices at the start of the orientation.

SDMS-09 Criteria for Placement Selection

SDMS-09.1 The operator shall provide written policies stating the criteria that shall be met in the selection of a suitable placement for any child. The criteria to be used in selecting a placement shall include reference to:

a) the child's cultural, racial, linguistic and socio-economic background and kinship ties

b) the child's religious background

c) the child's developmental, emotional, social, medical and educational needs

d) the child's interests, abilities, strengths and problems.

SDM-10 Supervision and Support of Foster Homes

SDMS-10.1 The operator shall assign a worker to supervise and support every foster family approved for placement and to arrange for the support services provided for in the service agreement. The worker shall:

a) respond to foster parent inquiries within 24 hours of the contact

b) visit a foster family home where a child is placed and talk with at least one foster parent within seven days of the placement, once again within 30 days of the placement and every three months thereafter

c) contact a family not currently caring for a child every three months.

SDM-11 Relief and Emergency Services

SDMS-11.1 The operator shall have written policies and procedures for the provision of both planned and emergency relief services for foster parents when required and shall ensure that a worker is available to respond within 24 hours to emergencies reported by foster parents.

SDM-12 Foster Parent Development

SDMS-12.1 The operator shall have written policies and practices with respect to development of its foster parents.

SDM-13 Transportation and Travel

SDM-13.1 The operator shall advise foster parents of the operator's position regarding the arrangement of travel for foster children inside and outside of the Province of Ontario.

SDM-14 Reporting of Serious Occurrences

SDMS-14.1 The operator shall inform the foster parents in writing of the serious occurrences involving the foster child that the foster parents shall report immediately to the operator. The operator shall provide emergency telephone numbers to the foster parents to call to report serious occurrences taking place after office hours. The serious occurrences that shall be reported include:

a) the death of the child

b) serious illness, serious injury or hospitalization of the child

c) a charge of a juvenile offence

d) abuse or mistreatment of the child

e) apprehension by police

f) alcohol or drug abuse

g) fire or other disasters in the home

h) absences of the child without permission from the home

i) any other serious occurrence pertaining to the child.

SDMS-14.2 The operator shall report within 24 hours to the placing agency:

a) the death of the child

b) serious illness, serious injury or hospitalization of the child

c) abuse or mistreatment of the child

d) fire or any other serious occurrence concerning the child.

SDMS-14.3 The operator shall report within 24 hours to the Director:

a) the death of the child

b) serious illness, serious injury or hospitalization of the child

c) abuse or mistreatment of the child.

SDM-15 Annual Foster Home Review

SDMS-15.1 The operator shall complete an annual written review of each foster home following a minimum of one interview with the foster parents for that purpose. The review shall be signed by both the foster parents and the operator and shall be placed in the foster family's file.

SDM-16 Service Complaint from Foster Parent

SDMS-16.1 The operator shall have a written complaint process for foster parents that shall be made known to foster parents during orientation. The written complaint process shall state:

a) how to launch a complaint

b) the circumstances that would warrant an investigation of a complaint

c) who is to be involved

d) the structure of the review hearing

e) the authority of any conclusions

f) the appeal procedure.

The operator shall respond to every service complaint from a foster parent within 24 hours of receiving the complaint and begin an investigation within five working days if warranted. The results shall be reported to the foster parents within five working days of concluding the investigation and shall be recorded in the foster family's file.

SDM-17 Investigation of Complaint Against Foster Family

SDMS-17.1 The operator shall respond to every complaint against a foster family concerning the care of their foster child within 24 hours of receiving the complaint and begin an investigation within five working days if warranted. The results shall be reported to the foster parents within five working days of concluding the investigation and shall be recorded in the foster family's file. The recording shall include:

a) the circumstances of the complaint that warranted the investigation

b) who was involved

c) the structure or form of the investigation

d) the recommendation

c) the decision made or action taken.

SDMS-17.2 The operator shall have written policies and procedures relating to the investigation of complaints regarding foster parent actions that contravene the provisions of FPS-15.2. These shall be made available to workers and foster parents during orientation.

SDM-18 **Foster Home Closure**

SDMS-18.1 The operator shall provide workers with written policies and procedures for closing foster homes. In situations where the foster parents oppose the operator's decision to close their home, the procedures shall include:

(a) a minimum of one interview with the foster parents

(b) a letter signed by the operator or his designate sent to the foster parents stating that their home is officially closed and that any agreements they have entered into with the operator or its workers are terminated.

SDM-19 **Contents of Foster Child Files**

SDMS-19.1 The operator shall maintain a written case file for each foster child in care including the following:

a) admission and placement documentation:

  i) identifying information and family background information (SEE: PAS-03.1)

  ii) the assessment report (SEE: PAS-03.1)

  iii) a record of all court orders and a summary of juvenile court findings, where applicable

  iv) health care, medical and dental history and reports (SEE: PAS-08.1)

  v) school information (SEE: FPS-02.1) including copies of all school reports

b) recording of care plans and reviews, where applicable:

  i) the foster care plan (SEE: PAS-06.1 and PAS-06.2)

  ii) psychological, psychiatric, educational and other reports pertaining to the functioning and/or care of the foster child

  iii) in the case of a developmentally, physically or learning-handicapped or emotionally disturbed child, a copy of evaluations made and plans provided by any professional, school, clinic or hospital services (SEE: FPS-01.1)

  iv) plans made with the natural parents (SEE: PAS-06.2)

  v) foster care plan and placement reviews (SEE: FPS-07.1 and PAS-11.1)

c) recording of any serious occurrences reported by the foster parents (SEE: SDMS-14.1) or other persons or agencies involved with the care of the child, including a description of the incident, who reported it, the date and the time.

SDM-20 **Contents of Foster Family Files**

SDMS-20.1 The operator shall maintain a written file for every foster family approved and open for placement of children. The file shall include the following:

a) the assessment of the foster family and their home (SEE: SDMS-05.1)

b) a copy of the foster care service agreement (SEE: SDMS-07.1)

c) a copy of every annual foster home review (SEE: SDMS-15.1)

d) a record of any complaint made by the foster parents (SEE: SDMS-16.1)

e) a record of any investigations regarding a complaint against the foster family (SEE: SDMS-17.1).

SDM-21 Confidentiality of and Access to Information

SDMS-21.1 The operator shall keep all foster care records on the operator's premises and in a locked container.

SDMS-21.2 Information held by the operator on a foster child shall be available to:

a) the child of 12 years of age or older

b) the legal guardian of the child

c) authorized persons in the employ of the operator

d) the child's foster parents when they have signed a statement of confidentiality (SEE: SDMS-07.1)

e) other agencies, professionals or hospitals when authorization has been given following written consent to release of the information by the child of 16 years of age or older or the legal guardian of a child under 16 years of age.

SDMS-21.3 Information held by the operator on a foster parent shall be available to:

a) the foster parent, except for references and other information given to the operator in confidence

b) authorized persons in the employ of the operator

c) other agencies, professionals or hospitals when authorization has been given following written consent to release of the information by the foster parent.

APPENDIX E

THE STANDARDS FOR PLACING AGENCIES

PA-01 Screening

PAS-01.1 The placing agency shall have a process for screening of potential clients to determine their need for service, and shall provide written guidelines to assist workers involved in the acquisition and evaluation of information to determine the need for service.

PA-02 Alternative Services

PAS-02.1 The placing agency shall keep up to date a list of services in the community that assist families and children, and may be used by the agency for referral. A copy shall be made available to all workers involved in screening.

PA-03 Assessment

PAS-03.1 The placing agency shall:

a) conduct a preliminary assessment prior to the admission of a child to care, except in emergency situations, to determine the needs of the child and whether the child is likely to return home after residential care, which shall include the following information:

   i) identifying information

   ii) referral data (source, date)

   iii) the legal status of the child

   iv) any circumstances that have created or contributed to the need for intervention

   v) any special needs of the child arising from drug and/or alcohol use, sexual orientation, behavioural disorder, or delinquency including a juvenile record

   vi) identification and consideration first of members of the child's immediate and extended family and secondly of other adults known to the child and his natural family and who can meet the child's needs

b) complete an assessment report within 21 days after placement of the child, in the case of either a planned or an emergency placement, which shall include information in (a) and the following information:

i) a history of the family members including social stresses, personality characteristics and current functioning related to health, work, adequacy and management of income, marital status, family relationships, family dependencies and community relationships

ii) the personality, characteristics and habits of the child including current physical, social, emotional and intellectual development, educational history and current functioning related to health, home routines, school activities and play, recreational or social interests, relationships with family members and peers, attitude towards discipline and parental control

iii) any inadequacies in the child's home that are judged to be emotionally and/or physically detrimental to the child

iv) any emotional, physical or developmental handicaps or problems of the child that preclude the child's care, management or treatment in his own home

v) significant events occurring in any previous placement

vi) the child's history of emotional attachment, his potential ability to deal with the experience of separation from his natural parents, and to benefit from living with another family, and his understanding of the situation

vii) any psychiatric, psychological, remedial, vocational, social and recreational services to be continued or provided to meet the child's needs.

The reason or reasons for inability to obtain any of the above information shall be noted in the assessment report. Where an assessment report could not be completed within 21 days after placement, the reason or reasons shall be noted in the child's file (SEE: SDMS-19.1).

PA-04 Criteria For Out-of-Home Care

PAS-04.1 The placing agency shall provide written criteria for determining the necessity for the use of out-of-home care including foster care and children's residential care facilities.

PA-05 The Decision to Place the Child in Care

PAS-05.1 The decision to place a child in care shall be made in a meeting including no fewer than the worker completing the assessment and a supervisor. Where the decision cannot be made in such a meeting, the worker shall inform the supervisor of the placement as soon as possible thereafter. The decision to place the child shall be recorded in the child's file and, where applicable, in the family's file and shall be signed by the supervisor.

PA-06 Foster Care Plan

PAS-06.1 The placing agency worker in consultation with his supervisor shall:

a) prepare a written preliminary foster care plan for the child prior to selection of the placement for the child with the involvement of the child in a manner suited to the child's age and understanding

b) seek the agreement to the plan of the child's natural parents and of the child of 12 years of age or over

c) finalize the plan within 30 days of placement after consultation with the operator and the child's foster parents

d) obtain the agreement of the operator and the foster parents to the plan.

PAS-06.2 The placing agency worker shall include in the foster care plan:

a) the anticipated duration and planned outcome of the placement: return to natural parents, independence, permanent foster care placement or adoption

b) the long-term goals and immediate objectives of foster care for the child designed to meet his developmental, emotional, social, medical and educational needs

c) the respective individual responsibilities of the child, the natural parents, the operator, the foster parents and placing agency in achieving the objectives

d) the time period within which the outcome of each objective set is to be met

e) the methods for developing and/or maintaining the relationship between the child and his natural parents, specifically to include work with the natural parents to make the necessary changes in the home so that the child may return to their care as soon as possible, and visiting by the child with the natural parents and family

f) the approach or approaches to discipline to be followed with the child

g) arrangements for informing the school the child currently attends of the transfer of the child to the foster home and where it is appropriate for the child to attend a different school, for enrolling the child in that school

h) a list of any psychiatric, psychological, remedial, vocational, social and recreational services to be provided to the child by the operator or any other agency or individual professional, and arrangements for the child to attend the services

i) the frequency, intensity and form of casework to be provided by the placing agency worker during the child's stay in the foster home, which shall include a visit by the worker with the child at least:

    i) once within the first seven days of placement

    ii) once again within the first 30 days of placement

    iii) once every three months thereafter.

The foster care plan shall be recorded in the child's file. Inability to obtain the agreement of the natural parents or the child of 12 years of age or older shall be noted in the plan. A copy of the plan shall be provided to the operator and the contents of the plan shall be shared with the foster parents, the natural parents and the child of 12 years of age or older.

PA-07 **Preparation for Separation**

PAS-07.1 The placing agency worker shall prepare the child and his natural parents for the separation of the child from them and shall include:

a) in consultation with the operator, a pre-placement visit by the child with the foster family in their home

b) recording in the child's file of the manner in which the process of separation was carried out and the reactions of the child and his natural family.

Where a pre-placement visit by the child to the foster home does not take place, the reason or reasons why shall be noted in the child's file.

PA-08 **General Health Care and Medical and Dental Services**

PAS-08.1 The placing agency shall ensure that the following medical and dental requirements are met for children in care:

a) determination at the time of admission of:

  i) evidence of serious bruising or significant injuries, and where there are specific indications that suggest either a medical examination or treatment is urgently required for the child, provision for the examination or treatment

  ii) symptoms of communicable or contagious diseases or indications of exposure to communicable or contagious diseases within 21 days prior to placement

b) a complete physical examination by a licensed physician or a registered nurse registered under the Health Disciplines Act, R.S.O. 1980, c. 196 within 30 days of admission to foster care and annually thereafter

c) a dental examination by a licensed dentist within six months prior to admission or within the first three months after admission or as soon as practicable thereafter for children three years of age and older and at least annually thereafter

d) further assessment and treatment of hearing and vision if indicated and psychological and psychiatric assessments and treatments where necessary and available

e) establishment of an ongoing immunization program, except for children whose parents provide a statement of medical or religious exemption

f) inclusion in each foster child's file of cumulative health and dental records stating the date, the name of the physician or dentist or other professional licensed or registered under the Health Disciplines Act, R.S.O. 1980, c. 196 and treatments provided the child while in the care of the operator.

PA-09 **Provisional Homes**

PAS-09.1 Where any child is in a home on a provisional basis, the placing agency shall ensure that:

a) A worker visits the home as soon as practicable within 24 hours, unless otherwise authorized by a supervisor or his designate, to determine that the home is free of hazards to health and physical safety and has a means of communicating with the placing agency.

b) The provisional parents are informed in writing of the serious occurrences involving the child that the provisional parents shall report immediately to the placing agency and are provided with emergency telephone numbers to call to report serious occurrences taking place after office hours. The serious occurrences that shall be reported include:

   i) the death of the child

   ii) serious illness, serious injury or hospitalization of the child

   iii) a charge under the Young Offenders Act

   iv) abuse or mistreatment of the child

   v) apprehension by police

   vi) alcohol or drug abuse

   vii) fire or other disasters in the home

   viii) absences of the child without permission from the home

   ix) any other serious occurrence pertaining to the child.

c) Within 30 days of the first visit by the worker, the following requirements are fulfilled:

   i) a further visit with at least one parent within seven days and where there is another parent, with the other within 30 days

   ii) commencement of an assessment to determine that the parents are appropriate persons to care for the child

   iii) work with the provisional parents to develop or revise a plan for the child, and agreement of the provisional parents to the plan.

d) An arrangement is made with the parents in the provisional home for support services to be provided during the child's stay in their home.

e) The home continues to be visited by the placing agency once every three months thereafter.

PA-10 **Emergency Placement**

PAS-10.1 The placing agency shall provide a written policy and criteria for emergency placement to assist workers to determine when emergency placements may be undertaken. Where removal of a child from the care of his parents in an emergency is being considered, the procedures shall include but not be limited to the following:

a) The worker shall consider first an arrangement for the child to live with members of his immediate and extended family. If an arrangement for the child to live with family members cannot be made or is not appropriate, a living arrangement shall be considered secondly with adults who are known to the child and his natural family and who can meet the child's needs.

b) If placement is required the worker responsible for placement shall be provided with all available data on the child.

c) The worker shall determine the need of the child for medical and/or psychiatric assessment at the time of emergency placement to establish whether the child requires specialized care, treatment or placement, arrange for such assessment and record the decision in the child's file.

d) The worker in consultation with a supervisor shall record in the child's file within five days:

  i) the circumstances that resulted in emergency placement

  ii) the location of the child

  iii) the probable duration of the child's stay in emergency placement

  iv) the long-term goals and immediate objectives of the placement for the child designed to meet his developmental, emotional, social, medical and educational needs.

PA-11 Placement Review

PAS-11.1 The placing agency with the operator shall review the progress of each child in residential care every three months for the first year the child is in care and annually thereafter, or when there is a change in the legal status of the child or the availability of the natural parents or when there is a change in court order regarding the involvement of the natural parents. The review shall be recorded in the child's file and shall be signed by the supervisor and include:

a) a statement of the factors necessitating residential care for the child

b) a statement regarding any change in the conditions that originally necessitated residential care

c) any changes in the duration and planned outcome of the placement

d) the progress of the child towards objectives set for the child

e) a description and evaluation of the child's adjustment to the placement in terms of resolving separation from his natural parents, adaptation to daily life in the placement, attendance and progress in school and participation in recreational and other leisure time activities

f) the degree of natural family involvement achieved (SEE: FPS-01.2 and FPS-02.1)

g) a description of any child behaviour problems and management methods or procedures used and the results

h) a statement of purpose for the continuation of residential care for the child and the objectives to be reached during placement.

PAS-12 Placement Change

PAS-12.1 Where a decision is made to change the placement, the placing agency shall inform the child's natural parents unless the parents' whereabouts are unknown, the parents are unavailable or they have not been involved with the child either by choice or by court order. The reason for not informing them shall be recorded in the child's file.

PA-13 Informing Natural Parents of Serious Occurrences

PAS-13.1 The placing agency shall inform the natural parents or legal guardian of a child in care within 24 hours or as soon as possible thereafter of:

a) the death of the child

b) serious illness, serious injury or hospitalization of the child.

Wherever possible the placing agency shall inform the natural parents in person of the serious illness, serious injury, hospitalization or death of a child in care.

PA-14 Preparation for Discharge

PAS-14.1 The decision to discharge or transfer a child from foster care shall be made by a placing agency worker and his supervisor in consultation with the operator. The worker shall prepare a plan for discharge or transfer which shall be recorded in the child's file and signed by the operator. The plan shall include:

a) the circumstances or conditions that have changed resulting in the discharge

b) the process by which the separation of the child and his foster family will be addressed

c) the date when the discharge will take place

d) the special needs of the child that must continue to be met after discharge

e) the name, relationship and current address of the person to whom the child will be discharged or the address of the child's new residence where independent living is planned.

PA-15 Transfer of Records

PAS-15.1 The placing agency shall transfer or arrange for the transfer of information relevant to the care of the child that the agency has developed or confirmed when the child enters care in a residential facility or supervision of the placement is assumed by another agency. The agency shall obtain the written consent to the transfer of information of:

a) a child over the age of 16 years

b) the natural parents or legal guardian of a child under the age of 16 years.

PA-16 **Aftercare**

PAS-16.1 The placing agency shall ensure that a written aftercare plan is developed prior to the termination of residential care for the child. A statement of the goals of aftercare, the services or casework to be provided and the duration of the plan shall be included. A date for discharge of the child from the care and supervision of the agency shall be projected. This plan shall be shared with the natural parents where appropriate and with the child.

PAS-16.2 The placing agency shall involve the operator, the foster parents, the foster child and the natural parents, where the foster child is returning home, in developing a plan for continued support to the child and his natural family after discharge. The specific recommendations shall be recorded in the aftercare plan.